| Fill in this information to identify your c                        | ase:  |                                 |
|--|---|---------------------------------|
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF TEXAS |   |                                 |
| Case number (if known):  | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is amended filing |

## Official Form 101

Part 1:

Your full name

**Identify Yourself** 

## **Voluntary Petition for Individuals Filing for Bankruptcy**

About Debtor 1:

Middle Name

Last Name

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

|    | Write the name that is on your government-issued picture identification (for example, | Allen First Name Chad      | First Name                 |  |
|----|---|----------------------------|----------------------------|--|
|    | your driver's license or passport).   | Middle Name                | Middle Name                |  |
|    |   | Gross                      |                            |  |
|    | Bring your picture identification to your meeting                                     | Last Name                  | Last Name                  |  |
|    | with the trustee.   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |  |
| 2. | All other names you   |                            |                            |  |
|    | have used in the last 8 years   | First Name                 | First Name                 |  |

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

Include your married or maiden names.

| xxx - xx - <u>3</u> | 6 | _4_ | 8 |
|---------------------|---|-----|---|
| OR                  |   |     |   |
| 9xx - xx -          |   |     |   |

| xxx - xx   |  |
|------------|--|
| OR         |  |
| 9xx - xx - |  |

Middle Name

Last Name

About Debtor 2 (Spouse Only in a Joint Case):

| Del | btor 1 Allen Chad G  | Gross   | Case number (if known)  |  |  |  |
|-----|--|---|---|--|--|--|
|     |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |  |  |  |
| 4.  | Any business names and Employer                                      | ✓ I have not used any business names or EIN   | Is.   I have not used any business names or EINs.   |  |  |  |
|     | Identification Numbers<br>(EIN) you have used in<br>the last 8 years |   | Business name   |  |  |  |
|     | Include trade names an   | Business name   | Business name   |  |  |  |
|     | doing business as nam  | es Business name  | Business name   |  |  |  |
|     |  | EIN   | EIN   |  |  |  |
|     |  | EIN   | EIN   |  |  |  |
| 5.  | Where you live   |   | If Debtor 2 lives at a different address:   |  |  |  |
|     |  | 5616 Autumn Wheat Trail Number Street   | Number Street   |  |  |  |
|     |  |   |   |  |  |  |
|     |  |   |   |  |  |  |
|     |  | Arlington TX 76017  |   |  |  |  |
|     |  | City State ZIP Code   | City State ZIP Code   |  |  |  |
|     |  | Tarrant<br>County   | County  |  |  |  |
|     |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address. |  |  |  |
|     |  | Number Street   | Number Street   |  |  |  |
|     |  | P.O. Box  | P.O. Box  |  |  |  |
|     |  | City State ZIP Code   | City State ZIP Code   |  |  |  |
| 6.  | Why you are choosing   | Check one:  | Check one:  |  |  |  |
|     | this district to file for<br>bankruptcy                              | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                              |  |  |  |
|     |  | I have another reason. Explain. (See 28 U.S.C. § 1408.)   | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)   |  |  |  |
| P   | Part 2: Tell the Co  | ourt About Your Bankruptcy Case   |   |  |  |  |
| 7.  | The chapter of the<br>Bankruptcy Code you                            |   | Notice Required by 11 U.S.C. § 342(b) for Individuals Filing of page 1 and check the appropriate box.   |  |  |  |
|     | are choosing to file<br>under  | Chapter 7   |   |  |  |  |
|     |  | Chapter 11  |   |  |  |  |
|     |  | Chapter 12  |   |  |  |  |
|     |  | Chapter 13  |   |  |  |  |

| Debtor 1 |                   | Allen Chad Gross                   | Case number (if known)  |   |  |   |                                     |  |                                      |                                |
|----------|-------------------|------------------------------------|-------------------------|---|--|---|-------------------------------------|--|--------------------------------------|--------------------------------|
| 8.       | How yo            | u will pay the fee                 | Ø                       | court for n   | nore details at<br>ash, cashier's                    | oout how you n<br>check, or mor                         | nay pay. Typic<br>ney order. If yo  | ease check with the ally, if you are payour attorney is subleck with a pre-pri                               | ying the fee you<br>mitting your pay | rself, you may                 |
|          |                   |                                    |                         | I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). |  |   |                                     |  |                                      |                                |
|          |                   |                                    |                         | By law, a j<br>than 150%<br>fee in insta  | judge may, bu<br>% of the officia<br>allments). If y | t is not require<br>I poverty line to<br>ou choose this | d to, waive you<br>nat applies to y | this option only if<br>ir fee, and may do<br>your family size ar<br>ust fill out the App<br>n your petition. | so only if your<br>nd you are unabl  | income is less<br>e to pay the |
| 9.       | •                 | ou filed for                       |                         | No  |  |   |                                     |  |                                      |                                |
|          | last 8 ye         | otcy within the<br>ears?           | $\overline{\mathbf{V}}$ | Yes.  |  |   |                                     |  |                                      |                                |
|          |                   |                                    | Dist                    | rict North  | ern District   | of Texas  | Whe                                 | en 12/30/2016<br>MM / DD / YYYY  | Case number                          | 16-44978                       |
|          |                   |                                    | Dist                    | rict North  | ern District   | of Texas  | Whe                                 | en 11/02/2013<br>MM / DD / YYYY  | Case number                          | 13-35636                       |
|          |                   |                                    | Dist                    | rict North  | ern District   | of Texas  | Whe                                 | en 09/03/2013<br>MM / DD / YYYY  | Case number                          | 13-44093                       |
| 10.      | •                 | any bankruptcy                     | $\overline{\mathbf{V}}$ | No  |  |   |                                     |  |                                      |                                |
|          | -                 | ending or being<br>a spouse who is |                         | Yes.  |  |   |                                     |  |                                      |                                |
|          |                   | g this case with<br>by a business  | Deb                     | tor   |  |   |                                     | Relationsh   | nip to you                           |                                |
|          | •                 | or by an                           | Dist                    | rict  |  |   | Whe                                 | en MM / DD / YYYY  |                                      |                                |
|          |                   |                                    | Deb                     | tor   |  |   |                                     | Relationsh   | nip to you                           |                                |
|          |                   |                                    | Dist                    |   |  |   | Whe                                 |  |                                      |                                |
| 11.      | Do you<br>residen | rent your<br>ce?                   |                         |   | -  |   | eviction judgme                     | ent against you?   |                                      |                                |
|          |                   |                                    |                         |   |  | t Initial Statem  | ent About an E<br>nkruptcy petitic  | viction Judgment<br>on.  | Against You (Fo                      | orm 101A)                      |

| Debtor 1 |   | Allen Chad Gross  |                     | Case number (if known)                      |   |                               |  |                                 |                             |                                   |
|----------|---|---|---------------------|---|---|-------------------------------|--|---------------------------------|-----------------------------|-----------------------------------|
| P        | art 3:  | Report About Ar   | ıy Bı               | ısine                                       | sses You Own as a   | a Sole Pro                    | prietor                                |                                 |                             |                                   |
| 12.      | -   | u a sole proprietor<br>full- or part-time<br>ss?  |                     |   | Go to Part 4.<br>Name and location of b   | usiness                       |  |                                 |                             |                                   |
|          | busines<br>individu<br>separat<br>a corpo   | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. |                     |   | Name of business, if any  Number Street   |                               |  |                                 |                             |                                   |
|          | If you has sole pro   |   |                     |   | City State  Check the appropriate box to describe your business:  Health Care Business (as defined in 11 U.S.C. § 101(27A))  Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)  Stockbroker (as defined in 11 U.S.C. § 101(53A))  Commodity Broker (as defined in 11 U.S.C. § 101(6))  None of the above |                               |  |                                 |                             | ZIP Code                          |
|          | Chapter 11 of the<br>Bankruptcy Code and  |   |                     | set ap                                      | filing under Chapter 11,<br>opropriate deadlines. If y<br>nt balance sheet, statem<br>f these documents do no   | you indicate<br>nent of opera | that you are a si<br>itions, cash-flow | mall business of statement, and | debtor, you<br>d federal ir | must attach your ncome tax return |
|          | debtor?   |   | No.                 | I am not filing under Cl                    | hapter 11.  |                               |  |                                 |                             |                                   |
|          | For a definition of small business debtor, see  |   |                     | No.   | I am filing under Chapt<br>the Bankruptcy Code.   | ter 11, but I                 | am NOT a small                         | business debt                   | or accordir                 | ng to the definition in           |
|          | 11 U.S.C. § 101(51D).   |   | Yes.                | I am filing under Chapt<br>Bankruptcy Code. | ter 11 and I  | am a small busir              | ness debtor ac                         | cording to t                    | the definition in the       |                                   |
| P        | art 4:  | Report If You Ov  | vn o                | r Hav                                       | e Any Hazardous F   | Property of                   | or Any Prope                           | erty That Ne                    | eds Imn                     | nediate Attention                 |
| 14.      | alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own            |   | What is the hazard? |   |   |                               |  |                                 |                             |                                   |
|          |   |   |                     |   | If immediate attention  | is needed, v                  | hy is it needed?                       | •                               |                             |                                   |
|          | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? |   |                     |   | Where is the property?  | Number                        | Street                                 |                                 |                             |                                   |
|          |   |   |                     |   |   | City                          |  |                                 | State                       | ZIP Code                          |

Debtor 1 Allen Chad Gross Case number (if known)

## **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |                                  |  |  |  |  |  |  |
|---|----------------------------------|--|--|--|--|--|--|
| credit counseling because of:                 |                                  |  |  |  |  |  |  |
| ☐ Incapacity.                                 | I have a mental illness or a mer |  |  |  |  |  |  |

I have a mental illness or a mental deficiency that makes me incapable of realizing or making

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

rational decisions about finances.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

certificate of completion.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

## ☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Debtor 1 Allen Chad Gross |  | Allen Chad Gross  | Case number (if known) |  |                  |  |       |  |  |
|---------------------------|--|---|------------------------|--|------------------|--|-------|--|--|
| P                         | art 6:   | Answer These Q  | uesti                  | ions for Reporting I   | Purpos           | ses  |       |  |  |
| 16.                       | What ki<br>have?                                     | nd of debts do you  | 16a.                   | •  | vidual pr<br>8b. | sumer debts? Consumer de imarily for a personal, family,   |       | re defined in 11 U.S.C. § 101(8) usehold purpose."   |  |
|                           |  |   |                        | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17. |                  |  |       |  |  |
|                           |  |   | 16c.                   | State the type of debts  | s you owe        | e that are not consumer or bu  | sines | s debts.   |  |
| 17.                       | Are you<br>Chapte                                    | ı filing under<br>r 7?  | <b>V</b>               | No. I am not filing und  | der Chap         | ter 7. Go to line 18.  |       |  |  |
|                           | any exe<br>exclude<br>adminis<br>are paid<br>availab | estimate that after empt property is ed and strative expenses d that funds will be le for distribution cured creditors? |                        | -  | •                | •  | -     | xempt property is excluded and to distribute to unsecured creditors?   |  |
| 18.                       |  | any creditors do<br>imate that you  |                        | 1-49<br>50-99<br>100-199<br>200-999  |                  | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   |       | 25,001-50,000<br>50,001-100,000<br>More than 100,000   |  |
| 19.                       |  | uch do you<br>e your assets to<br>h?  |                        | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   |                  | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million |       | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |  |
| 20.                       |  | uch do you<br>e your liabilities to   |                        | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   |                  | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million |       | \$500,000,001-\$1 billion<br>\$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion<br>More than \$50 billion |  |

| Debtor 1 | Allen Chad Gross | Case number (if known)   |  |  |  |  |
|----------|------------------|--|--|--|--|--|
| Part 7:  | Sign Below       |  |  |  |  |  |
| For you  |                  | I have examined this petition, and I decla and correct.  | re under penalty of perjury that the information provided is true  |  |  |  |
|          |                  | If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. |  |  |  |  |
|          |                  | pay or agree to pay someone who is not an attorney to help med read the notice required by 11 U.S.C. § 342(b).   |  |  |  |  |
|          |                  | apter of title 11, United States Code, specified in this petition.   |  |  |  |  |
|          |                  |  | concealing property, or obtaining money or property by fraud in sult in fines up to \$250,000, or imprisonment for up to 20 years, and 3571. |  |  |  |
|          |                  | X /s/ Allen Chad Gross   | X  |  |  |  |
|          |                  | Allen Chad Gross, Debtor 1   | Signature of Debtor 2  |  |  |  |
|          |                  | Executed on 10/25/2018   | Executed on  |  |  |  |

MM / DD / YYYY

MM / DD / YYYY

| Debtor 1   | Allen Chad Gross                          |  | Case number (if knowr       | n)                           |  |  |  |  |
|------------|---|--|-----------------------------|------------------------------|--|--|--|--|
| represente | not represented by<br>ey, you do not need | I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. |                             |                              |  |  |  |  |
|            |   | X /s/ Daniel S. Wright Signature of Attorney for Debtor  | Date                        | 10/25/2018<br>MM / DD / YYYY |  |  |  |  |
|            |   | Daniel S. Wright Printed name  |                             |                              |  |  |  |  |
|            |   | Machi & Associates Firm Name  1521 N. Cooper St., Suite 550  |                             |                              |  |  |  |  |
|            |   | Number Street  |                             |                              |  |  |  |  |
|            |   |  |                             |                              |  |  |  |  |
|            |   | Arlington<br>City  | TX<br>State                 | 76011<br>ZIP Code            |  |  |  |  |
|            |   | Contact phone (817) 335-8880   | Email address <b>dwrigh</b> | nt@tedmachi.com              |  |  |  |  |
|            |   | <b>24037742</b> Bar number   | TX State                    | _                            |  |  |  |  |

| Fill in this inf          | formation to ic                              | lentify your case  | and this filing:   | 1  |                            |
|---------------------------|--|--|--|--|----------------------------|
| Debtor 1                  | Allen  | Chad   | Gross  |  |                            |
| Debtor 2                  | First Name                                   | Middle Name  | Last Name  |  |                            |
| (Spouse, if filing)       | First Name                                   | Middle Name  | Last Name  |  |                            |
| United States Ba          | inkruptcy Court for                          | the: NORTHERN D  | DISTRICT OF TEXAS  |  |                            |
| Case number<br>(if known) |  |  |  |  | if this is an<br>ed filing |
| Official Form             | 106A/B                                       |  |  |  |                            |
| Schedule A                | B: Property                                  | 1  |  |  | 12/15                      |
| Part 1: De  1. Do you own | oth are equally resonance of a scribe Each R | sponsible for supply<br>ny additional pages,<br>esidence, Buildi<br>or equitable interes | ing correct information. If mo<br>write your name and case nu                              | as possible. If two married peore space is needed, attach a simber (if known). Answer eve  Estate You Own or Have  and, or similar property? | separate<br>ry question.   |
| 1.1.<br>Timeshare - Gra   |  | what is t<br>egas, Check all<br>☐ Singl  | he property? that apply. e-family home ex or multi-unit building                           | Do not deduct secured clai<br>amount of any secured clai<br>Creditors Who Have Claim.<br>Current value of the                                | ms on Schedule D:          |
| Clark County, N           | IV   | Cond   | ominium or cooperative   | entire property?   | portion you own?           |
| County                    |  | Land Inves   | Ifactured or mobile home Itment property Ishare  | \$1,000.00  Describe the nature of yo interest (such as fee simple entireties, or a life estate)   | ole, tenancy by the        |
|                           |  |  | an interest in the property?   | Fee Simple   |                            |
|                           |  | ☐ Debto  | e.<br>or 1 only<br>or 2 only<br>or 1 and Debtor 2 only<br>ast one of the debtors and anoth | Check if this is comm (see instructions)   | unity property             |
|                           |  |  | ormation you wish to add abo   | out this item, such as local   | _                          |
|                           |  | -  | of your entries from Part 1, ir  |  | \$1,000.00                 |
| Part 2: De                | scribe Your V                                | ehicles  |  | •  |                            |
| Do you own, leas          | e, or have legal o                           | r equitable interest i   |  | are registered or not? Include<br>ixecutory Contracts and Unexpire   | •                          |
| 3. Cars, vans, t          | rucks, tractors, s                           | port utility vehicles,   | motorcycles  |  |                            |
| □ No<br>☑ Yes             |  |  |  |  |                            |

Official Form 106A/B Schedule A/B: Property page 1

| Deb  | Debtor 1 Allen Chad Gross   |   |  | Case number (if known)  |   |  |  |
|------|---|---|--|---|---|--|--|
|      | ke:<br>del:   | Ford<br>F150 Pickup<br>2013<br>160,000              | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | Do not deduct secured clair amount of any secured clair Creditors Who Have Claims Current value of the entire property? \$22,450.00 | ms on <i>Schedule D:</i>  |  |  |
|      | 3 Ford F150 Pic<br>0000 miles)  | ckup (approx.                                       | Check if this is community property (see instructions)   |   |   |  |  |
| Othe | del: r: roximate mileage: er information:   | re (approx. 160000                                  | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions) | Do not deduct secured clair amount of any secured clair Creditors Who Have Clairs Current value of the entire property?  \$1,500.00 | ms on Schedule D:   |  |  |
| 4.   |   |   | s and other recreational vehicles, other veh<br>al watercraft, fishing vessels, snowmobiles, m   |   |   |  |  |
| 5.   |   | •   | own for all of your entries from Part 2, incluing Part 2. Write that number here   | _   | \$23,950.00   |  |  |
| P    | art 3: Descr  | ribe Your Personal                                  | and Household Items  |   |   |  |  |
| Do   |   |   | nterest in any of the following items?   |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |  |  |
| 6.   | 6. Household goods and furnishings  Examples: Major appliances, furniture, linens, china, kitchenware  □ No □ Yes. Describe kitchenware, kitchen table and chairs, refrigerator, washer/dryer, hutch, leather couch, love seat, TV stand, 3 beds, 2 dressers, 2 couches, coffee table, power tools, hand tools, miscellaneous household goods, tools and furnishings. |   |  |   |   |  |  |
| 7.   | music   | c collections; electronic d                         | video, stereo, and digital equipment; computevices including cell phones, cameras, medias, x-box, PlayStation4, 5 cell phones, 2   | a players, games  | \$4,500.00  |  |  |
| 8.   | Collectibles of vo  | desktop compu<br>alue<br>ues and figurines; paintin | ter and miscellaneous electronics  ags, prints, or other artwork; books, pictures, ocollections; other collections, memorabilia, col   | or other art objects;   | ψ+,σσσ.σσ   |  |  |
|      | ☐ No<br>☑ Yes. Describ  | e Artwork   |  |   | \$600.00  |  |  |
| 9.   | Examples: Sports canoe  |   | e, and other hobby equipment; bicycles, pool t tools; musical instruments  | ables, golf clubs, skis;  |   |  |  |
|      | ✓ No  ☐ Yes. Describ  | oe  |  |   |   |  |  |

| Deb | tor 1                     | Allen Chad Gross   | Case number (if known)           |   |
|-----|---------------------------|--|----------------------------------|---|
| 10. | <b>☑</b> No               | s: Pistols, rifles, shotguns, ammunition, and related equipment  |                                  |   |
|     | ☐ Yes.                    | Describe   |                                  |   |
| 11. | Clothes Examples          | s: Everyday clothes, furs, leather coats, designer wear, shoes, accessorie   | es                               |   |
|     | Yes.                      | Describe Everyday clothes and shoes  |                                  | \$1,200.00  |
| 12. | Jewelry<br>Examples       | s: Everyday jewelry, costume jewelry, engagement rings, wedding rings, h<br>gold, silver   | neirloom jewelry, watches, gems, |   |
|     | □ No ✓ Yes.               | Describe Wedding ring, necklaces, rings, gold bracelets, dia<br>tennis bracelet, watches, costume jewelry  | amond earrings, diamond          | \$4,500.00  |
| 13. | Non-farm Examples  No     | n animals<br>s: Dogs, cats, birds, horses  |                                  |   |
|     | ✓ Yes.                    | Describe dog   |                                  | \$1.00  |
| 14. | did not lis  ✓ No  ☐ Yes. | er personal and household items you did not already list, including an ist  Give specific mation   | y health aids you                |   |
| 15  | Add the                   | dollar value of all of your entries from Part 3, including any entries fo  | r nages you have                 |   |
| 15. | attached                  | for Part 3. Write the number here  | → pages you have                 | \$18,801.00   |
|     |                           | Describe Very Financial Access   | ,                                |   |
| Pa  | art 4:                    | Describe Your Financial Assets   |                                  |   |
| Doy | ou own o                  | or have any legal or equitable interest in any of the following?   |                                  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash<br>Examples          | s: Money you have in your wallet, in your home, in a safe deposit box, and petition  | d on hand when you file your     |   |
|     | □ No ✓ Yes                |  | Cash <sup>.</sup>                | \$500.00  |
| 17  | _                         | of money   |                                  | <del></del>   |
| ••• | -                         | s: Checking, savings, or other financial accounts; certificates of deposit; s<br>brokerage houses, and other similar institutions. If you have multiple a<br>institution, list each. |                                  |   |
|     | ✓ No<br>☐ Yes             | Institution name:  |                                  |   |
| 18. |                           | nutual funds, or publicly traded stocks s: Bond funds, investment accounts with brokerage firms, money market  | accounts                         |   |
|     | ✓ No<br>☐ Yes             | Institution or issuer name:  |                                  |   |

| Debt | tor 1 Allen Chad Gross  | Case number (if known)  |            |
|------|---|---|------------|
| 19.  | Non-publicly traded stock and interests in incorporan interest in an LLC, partnership, and joint venture.   | · · · · · · · · · · · · · · · · · · ·   |            |
|      | No     Yes. Give specific information about them Name of entity:  | % of ownership:   |            |
| 20.  | Government and corporate bonds and other negonal Negotiable instruments include personal checks, cas Non-negotiable instruments are those you cannot tra  | shiers' checks, promissory notes, and money orders.   |            |
|      | ✓ No  Yes. Give specific information about them Issuer name:  |   |            |
| 21.  | Retirement or pension accounts  Examples: Interests in IRA, ERISA, Keogh, 401(k), 4 profit-sharing plans  | 403(b), thrift savings accounts, or other pension or  |            |
|      | <ul><li>No</li><li>✓ Yes. List each account separately. Type of account: Institute of the count of the count</li></ul> | stitution name:   |            |
|      | 401(k) or similar plan: 40  | 01(k)   | \$1,800.00 |
| 22.  | · · ·   | that you may continue service or use from a company public utilities (electric, gas, water), telecommunications |            |
|      | ✓ No  |   |            |
| 22   |   | ution name or individual:<br>nt of money to you, either for life or for a number of years)                      |            |
| 20.  | <b>☑</b> No   |   |            |
| 24   | Yes Issuer name and descrip   |   |            |
| 24.  | 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).   | qualified ABLE program, or under a qualified state tuition program.   |            |
|      | ✓ No ☐ Yes Institution name and des   | scription. Separately file the records of any interests. 11 U.S.C. § 521(c)                                     |            |
| 25.  | Trusts, equitable or future interests in property (c powers exercisable for your benefit  | other than anything listed in line 1), and rights or  |            |
|      | <ul><li>✓ No</li><li>Yes. Give specific information about them</li></ul>  |   |            |
| 26.  | Patents, copyrights, trademarks, trade secrets, at <i>Examples</i> : Internet domain names, websites, proceed   |   |            |
|      | ✓ No  Yes. Give specific information about them   |   |            |
| 27.  | <b>Licenses, franchises, and other general intangible</b> <i>Examples:</i> Building permits, exclusive licenses, coo  | es<br>perative association holdings, liquor licenses, professional licenses                                     |            |
|      | ✓ No ☐ Yes. Give specific information about them  |   |            |

| Deb | tor 1                    | Allen Chad Gross  |   | Case number (if known)  |   |
|-----|--------------------------|---|---|---|---|
| Mor | ney or pro               | operty owed to you?   |   |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refu                 | ınds owed to you  |   |   |   |
|     | abou<br>you              | . Give specific information them, including whether already filed the returns the tax years | er  |   | Federal:State:  |
| 29. | Family s Example No      | • •   | n alimony, spousal support, c                                     | hild support, maintenance, divorce settlement                                     | t, property settlement  |
|     |                          | . Give specific information   | on  | Alimony:  |   |
|     |                          |   |   | Maintenar   | nce:  |
|     |                          |   |   | Support:  |   |
|     |                          |   |   | Divorce se  | ettlement:  |
|     |                          |   |   | Property s  | ettlement:  |
| 30. | Example  No              |   | lity insurance payments, disa<br>Il Security benefits; unpaid loa | ability benefits, sick pay, vacation pay, workers<br>ans you made to someone else | S'  |
| 31. | Example No Yes com       | . Name the insurance pany of each policy  | ife insurance; health savings  Company name:                      | account (HSA); credit, homeowner's, or rente<br>Beneficiary:                      | r's insurance<br>Surrender or refund value:                                       |
| 32. | If you ar entitled to No |   | use someone has died  | o has died<br>m a life insurance policy, or are currently                         |   |
| 33. | Example No               | •   | ent disputes, insurance claims                                    | a lawsuit or made a demand for payment s, or rights to sue                        |   |
| 34. | rights to                | ontingent and unliquida o set off claims  . Describe each claim                             | •   | including counterclaims of the debtor and   |   |
| 35. | _                        | ancial assets you did no  |   |   | <del></del>   |
|     | ✓ No<br>☐ Yes            | . Give specific information   | on  |   |   |
| 36. |                          | -   |   | uding any entries for pages you have  | \$2,300.00  |

| Debt | or 1         | Allen Chad Gross Case number (if known   | Case number (if known)                                      |  |  |
|------|--------------|--|---|--|--|
| Pa   | rt 5:        | Describe Any Business-Related Property You Own or Have an Interest In. Li  | ist any real estate in Part 1.                              |  |  |
|      |              | own or have any legal or equitable interest in any business-related property?  | •   |  |  |
|      | -            | . Go to Part 6.  |   |  |  |
|      |              | s. Go to line 38.  |   |  |  |
|      |              |  | Current value of the portion you own? Do not deduct secured |  |  |
| 38.  | Accou        | nts receivable or commissions you already earned   | claims or exemptions.                                       |  |  |
|      | ✓ No         | s. Describe  |   |  |  |
| 39.  | Office       | equipment, furnishings, and supplies   |   |  |  |
|      |              | bles: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephon desks, chairs, electronic devices  | es,   |  |  |
|      | <b>☑</b> No  |  |   |  |  |
|      | _            | s. Describe  |   |  |  |
| 40.  | Machii       | nery, fixtures, equipment, supplies you use in business, and tools of your trade   |   |  |  |
|      | ✓ No<br>☐ Ye | s. Describe  |   |  |  |
| 41.  | Invent       | ory  |   |  |  |
|      | ☑ No         | s. Describe  |   |  |  |
| 42.  | Interes      | sts in partnerships or joint ventures  |   |  |  |
|      | <b>√</b> No  |  |   |  |  |
|      |              | s. Describe Name of entity: % of owner   | ership:   |  |  |
| 43.  | Custor       | mer lists, mailing lists, or other compilations  |   |  |  |
|      | ☑ No<br>□ Ye | s. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))  No Yes. Describe                    | ?   |  |  |
| 44.  | Any bu       | usiness-related property you did not already list  |   |  |  |
|      | ✓ No         | s. Give specific information.  |   |  |  |
|      |              | e dollar value of all of your entries from Part 5, including any entries for pages you have<br>ed for Part 5. Write that number here   | \$0.00  |  |  |
| Pa   | rt 6:        | Describe Any Farm- and Commercial Fishing-Related Property You Own or I If you own or have an interest in farmland, list it in Part 1. | Have an Interest In.  |  |  |
| 46.  | Do you       | u own or have any legal or equitable interest in any farm- or commercial fishing-related proper  | ty?   |  |  |
|      | بن           | s. Go to Part 7.   |   |  |  |

| Deb | tor 1         | Allen Chad Gross  | Case number (if known) |   |
|-----|---------------|---|------------------------|---|
|     |               |   |                        | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 47. | Farm a        |   |                        |   |
|     |               | es: Livestock, poultry, farm-raised fish  |                        |   |
|     | ✓ No          | ····  |                        |   |
| 48. | Crops         | either growing or harvested   |                        |   |
|     |               | s. Give specific rmation  |                        |   |
| 49. | Farm a        | nd fishing equipment, implements, machinery, fixtures, and tools of tra                               | ade                    |   |
|     | ✓ No<br>☐ Yes | ·   |                        |   |
| 50. | Farm a        | nd fishing supplies, chemicals, and feed  |                        |   |
|     | ✓ No<br>☐ Yes | i   |                        |   |
| 51. | Any far       | m- and commercial fishing-related property you did not already list                                   |                        |   |
|     |               | s. Give specific rmation  |                        |   |
| 52. |               | e dollar value of all of your entries from Part 6, including any entries fo                           |                        | \$0.00  |
| P   |               | Describe All Property You Own or Have an Interest in Tha  |                        |   |
| 53. | -             | have other property of any kind you did not already list? es: Season tickets, country club membership |                        |   |
|     | ✓ No<br>☐ Yes | s. Give specific information.   |                        |   |
| 54. | Add the       | e dollar value of all of your entries from Part 7. Write that number here                             | <b>→</b>               | \$0.00  |

| Debtor 1    | Allen Chad Gross  | Case nu     | umber (if known)             |               |
|-------------|---|-------------|------------------------------|---------------|
| Part 8:     | List the Totals of Each Part of this Form               |             |                              |               |
| 55. Part 1  | Total real estate, line 2                               |             | <b>-</b>                     | \$1,000.00    |
| 56. Part 2  | Total vehicles, line 5                                  | \$23,950.00 |                              |               |
| 57. Part 3  | Total personal and household items, line 15             | \$18,801.00 |                              |               |
| 58. Part 4  | Total financial assets, line 36                         | \$2,300.00  |                              |               |
| 59. Part 5  | Total business-related property, line 45                | \$0.00      |                              |               |
| 60. Part 6  | Total farm- and fishing-related property, line 52       | \$0.00      |                              |               |
| 61. Part 7  | Total other property not listed, line 54                | +\$0.00     |                              |               |
| 62. Total į | personal property. Add lines 56 through 61              | \$45,051.00 | Copy personal property total | + \$45,051.00 |
| 63. Total o | of all property on Schedule A/B. Add line 55 + line 62. |             |                              | \$46,051.00   |

| Fill in this inf   | ormation to i  | dentify your o  | case:   |                               |  |  |
|--|--|---|---|-------------------------------|--|--|
| Debtor 1   | Allen  | Chad  | Gross   |                               |  |  |
| Dobtor 2   | First Name   | Middle Name   | Last Name   |                               |  |  |
| Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name   | Last Name   |                               |  |  |
| United States Bar  | nkruptcy Court fo  | r the: NORTHE   | RN DISTRICT OF 1  | ΓEX.                          | <u>us</u>  | ☐ Check if this is an  |
| Case number (if known)   |  |   |   |                               |  | amended filing   |
| Official Form  | all and a second a second and a second a second and a second a second and a second a second and a second and a second and a second a second a second a second and |   |   |                               |  |  |
| Schedule C:  | The Prope  | erty You Cla  | aim as Exemp  | ot                            |  | 04/16  |
| Using the property   | you listed on <i>Sc</i><br>Il out and attach   | hedule A/B: Prope<br>to this page as m  | erty (Official Form 10  | SA/B)                         | as your source, list th  | esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages,  |
| is to state a specific exempted up to the receive certain be exemption of 100° | fic dollar amour<br>te amount of any<br>nefits, and tax-e<br>% of fair market  | at as exempt. Alt<br>y applicable state<br>exempt retiremer<br>value under a la | ternatively, you may<br>utory limit. Some ex<br>nt fundsmay be unl<br>w that limits the exe | claii<br>emp<br>imite<br>mpti | n the full fair market<br>tionssuch as those<br>d in dollar amount.  F | you claim. One way of doing so<br>value of the property being<br>for health aids, rights to<br>However, if you claim an<br>lar amount and the value of the<br>le statutory amount. |
| Part 1: Ide  | ntify the Pro  | perty You Cla   | im as Exempt  |                               |  |  |
| 1. Which set of  | exemptions are   | you claiming?   | Check one only,   | even                          | if your spouse is filing   | with you.  |
|  | •  |   | kruptcy exemptions.<br>J.S.C. § 522(b)(2)   | 11 U                          | S.C. § 522(b)(3)   |  |
| 2. For any prop  | erty you list on   | Schedule A/B th   | at you claim as exer  | npt, 1                        | ill in the information   | below.   |
| Brief description of Schedule A/B that   |  |   | Current value of the portion you own  |                               | ount of the<br>mption you claim  | Specific laws that allow exemption   |
|  |  |   | Copy the value from Schedule A/B  |                               | eck only one box for<br>h exemption                                    |  |
| Brief description:   |  |   | \$1,000.00  |                               | \$0.00   | 11 U.S.C. § 522(d)(5)  |
| Timeshare - Gra  | ndview, Las V  | egas, NV  | Ψ1,000.00   |                               | 100% of fair market  |  |
| Line from Schedule   | e A/B: 1.1   |   |   |                               | value, up to any applicable statutory limit                            |  |
| Brief description:   |  |   | \$22,450.00   |                               | \$0.00   | 11 U.S.C. § 522(d)(5)  |
| 2013 Ford F150   | Pickup (appro  | x. 160000   |   |                               | 100% of fair market  |  |
| miles) Line from Schedule  | e A/B: <b>3.1</b>  |   |   |                               | value, up to any applicable statutory limit                            |  |
| (Subject to ad   | justment on 4/01   | /19 and every 3 y   |   | es fi                         | ed on or after the date  |  |
| Yes. Did   |  | property covered  | by the exemption wit  | nin 1                         | ,215 days before you f   | lied this case?  |

| Allen Chad Gross  |                                      | Case numbe  | r (if known)                       |
|---|--------------------------------------|---|------------------------------------|
| Part 2: Additional Page   |                                      |   |                                    |
| Brief description of the property and line on Schedule A/B that lists this property   | Current value of the portion you own | Amount of the exemption you claim   | Specific laws that allow exemption |
|   | Copy the value from Schedule A/B     | Check only one box for each exemption                                       |                                    |
| Brief description: 1996 Buick LeSabre (approx. 160000 miles) - son drives vehicle Line from Schedule A/B:   | \$1,500.00                           | \$1,500.00 100% of fair market value, up to any applicable statutory limit  | 11 U.S.C. § 522(d)(2)              |
| Brief description: kitchenware, kitchen table and chairs, refrigerator, washer/dryer, hutch, leather couch, love seat, TV stand, 3 beds, 2 dressers, 2 couches, coffee table, power tools, hand tools, miscellaneous household goods, tools and furnishings. Line from Schedule A/B:6 | \$8,000.00                           | \$8,000.00  100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3)              |
| Brief description: 4 TVs, 3 laptops, x-box, PlayStation4, 5 cell phones, 2 cameras, i-pad, tablet, desktop computer and miscellaneous electronics Line from Schedule A/B:7  | \$4,500.00                           | \$4,500.00 100% of fair market value, up to any applicable statutory limit  | 11 U.S.C. § 522(d)(3)              |
| Brief description:  Artwork (1st exemption claimed for this asset) Line from Schedule A/B:8   | \$600.00                             | \$125.00 100% of fair market value, up to any applicable statutory limit    | 11 U.S.C. § 522(d)(3)              |
| Brief description: Artwork (2nd exemption claimed for this asset) Line from Schedule A/B:8  | \$600.00                             | \$475.00 100% of fair market value, up to any applicable statutory limit    | 11 U.S.C. § 522(d)(5)              |
| Brief description:  Everyday clothes and shoes (1st exemption claimed for this asset) Line from Schedule A/B:11   | \$1,200.00                           | \$0.00 100% of fair market value, up to any applicable statutory limit      | 11 U.S.C. § 522(d)(3)              |
| Brief description:  Everyday clothes and shoes (2nd exemption claimed for this asset) Line from Schedule A/B:11   | \$1,200.00                           | \$1,200.00 100% of fair market value, up to any applicable statutory limit  | 11 U.S.C. § 522(d)(5)              |
| Brief description:  Wedding ring, necklaces, rings, gold bracelets, diamond earrings, diamond tennis bracelet, watches, costume jewelry (1st exemption claimed for this asset) Line from Schedule A/B: 12   | \$4,500.00                           | \$1,600.00  100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(4)              |

| Debtor 1                              | Allen Chad Gross   |                                      | Case number (if known)  |                                    |  |
|---------------------------------------|--|--------------------------------------|---|------------------------------------|--|
| Part 2:                               | Additional Page  |                                      |   |                                    |  |
|                                       | ription of the property and line on<br>A/B that lists this property  | Current value of the portion you own | Amount of the exemption you claim   | Specific laws that allow exemption |  |
|                                       |  | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                                       |                                    |  |
| bracelets,<br>tennis bra<br>(2nd exem | ption: ring, necklaces, rings, gold , diamond earrings, diamond acelet, watches, costume jewelry nption claimed for this asset) schedule A/B: 12 | \$4,500.00                           | \$2,900.00 100% of fair market value, up to any applicable statutory limit  | 11 U.S.C. § 522(d)(5)              |  |
| Brief description dog Line from S     | ption:<br>Schedule A/B: <b>13</b>  | \$1.00                               | \$1.00 100% of fair market value, up to any applicable statutory limit      | 11 U.S.C. § 522(d)(5)              |  |
| Brief descrip<br>Cash on h            | •  | \$500.00                             | \$500.00  100% of fair market value, up to any applicable statutory limit   | 11 U.S.C. § 522(d)(5)              |  |
| Brief description 401(k) Line from S  | ption:<br>Schedule A/B: <b>21</b>  | \$1,800.00                           | \$1,800.00  100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(12)             |  |

| Fill in this inf  | own office to in    | lantify years             |                   |                          |                    |             |
|---|---------------------|---------------------------|-------------------|--------------------------|--------------------|-------------|
| Debtor 1  | Allen               | lentify your case<br>Chad | Gross             |                          |                    |             |
|   | First Name          | Middle Name               | Last Name         |                          |                    |             |
| Debtor 2<br>(Spouse, if filing)   | First Name          | Middle Name               | Last Name         |                          |                    |             |
| United States Bar   | nkruptcy Court for  | the: NORTHERN D           | ISTRICT OF TEXAS  | <u> </u>                 |                    |             |
| Case number   |                     |                           |                   |                          | ☐ Check if this is | s an        |
| (if known)  |                     |                           |                   |                          | amended filing     |             |
| Official Form   | 106D                |                           |                   |                          |                    |             |
| Schedule D:   | Creditors \         | Who Have Cla              | ims Secured b     | y Property               |                    | 12/15       |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form.  On the top of any additional pages, write your name and case number (if known).  1. Do any creditors have claims secured by your property?  No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  Yes. Fill in all of the information below.  Part 1: List All Secured Claims  2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As mount of claim Do not deduct the value of collateral that supports this claim of the portion lift any   |                     |                           |                   |                          |                    |             |
| 2.1   |                     | Describe the secures the  | property that     | \$35,000.00              | \$22,450.00        | \$12,550.00 |
| 360 Smart Car Creditor's name 624 N. Watson Number Street   |                     | 2013 Ford I               | F150              | s: Check all that apply. |                    |             |
| Contingent    Contingent   Unliquidated     Disputed     Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   At least one of the debtors and another     Check if this claim relates to a community debt   Contingent     Contingent   Unliquidated     Disputed     Nature of lien. Check all that apply.     An agreement you made (such as mortgage or secured car loan)     Statutory lien (such as tax lien, mechanic's lien)     Judgment lien from a lawsuit     Other (including a right to offset)     Installment Loan     Installment Loan     Contingent     Unliquidated     Disputed     Nature of lien. Check all that apply.     An agreement you made (such as mortgage or secured car loan)     Statutory lien (such as tax lien, mechanic's lien)     Judgment lien from a lawsuit     Other (including a right to offset)     Installment Loan     Other (including a right to offset)     Other (including a right to offset) |                     |                           |                   |                          |                    |             |
| Date debt was inc   | urred <u>2-2017</u> | Last 4 digits             | of account number |                          |                    |             |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$35,000.00

| Debtor 1 Allen Chad Gross  |  | Case number (if known)   |   |                                   |  |  |
|--|--|--|---|-----------------------------------|--|--|
| Additional Page Part 1: After listing any entries sequentially from the  | s on this page, number them previous page.   | Column A  Amount of claim  Do not deduct the value of collateral               | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |  |  |
| El Dorado Creditor's name 2626 E. Oakland Park Blvd. Number Street   | Describe the property that secures the claim:  —— Timeshare - Grandview, Las Vegas, NV   | secures the claim: \$3,559.00 \$1,000.00 \$2,559.00 Timeshare - Grandview, Las |   |                                   |  |  |
| Fort Lauderdale FL 33306 City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and the debtors are decomposed to a community debt | As of the date you file, the claim is:  Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, m Judgment lien from a lawsuit Other (including a right to offset) Timeshare | s mortgage or secured  | car loan)   |                                   |  |  |
| Date debt was incurred   | Last 4 digits of account number  |  |   |                                   |  |  |

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$3,559.00 \$38,559.00

| Fill in this inf  | ormation to id  | dentify your c  | ase:  |                         |  |  |                             |
|---|---|---|---|-------------------------|--|--|-----------------------------|
| Debtor 1  | Allen   | Chad  | Gross   |                         |  |  |                             |
|   | First Name  | Middle Name   | Last Name   |                         |  |  |                             |
| Debtor 2  |   |   |   |                         |  |  |                             |
| (Spouse, if filing)   | First Name  | Middle Name   | Last Name   |                         |  |  |                             |
| United States Ba  | nkruptcy Court for  | the: <b>NORTHER</b>   | N DISTRICT OF TEXAS   |                         |  |  |                             |
| Case number   |   |   |   |                         | _  | <b>.</b>   |                             |
| (if known)  |   |   |   |                         | L  | Check if this is a<br>amended filing             | an                          |
| Official Form   | 106E/F  |   |   |                         |  |  |                             |
| Schedule E/   | /F: Creditor  | s Who Have  | e Unsecured Claim   | S                       |  |  | 12/15                       |
| Do not include an If more space is not to this page. On the | y creditors with<br>needed, copy the<br>the top of any ad | partially secured<br>Part you need, fi<br>ditional pages, w   | and on Schedule G: Execute claims that are listed in Sc II it out, number the entries rite your name and case nusecured Claims            | hedule in the b         | D: Creditors Who Foxes on the left. A        | lold Claims Secur                                | ed by Property.             |
| 1. Do any credi   | tors have priority  | unsecured clair   | ns against you?   |                         |  |  |                             |
| ☐ No. Go  | to Part 2.  |   |   |                         |  |  |                             |
| ✓ Yes.  |   |   |   |                         |  |  |                             |
| claim. For ea<br>show both prid<br>more space is            | ch claim listed, id ority and nonprior                    | entify what type of<br>ty amounts. As m<br>ty unsecured clair | creditor has more than one p<br>f claim it is. If a claim has bot<br>nuch as possible, list the clain<br>ns, fill out the Continuation Pa | h priority<br>ns in alp | y and nonpriority am<br>habetical order acco | nounts, list that clait<br>ording to the credite | m here and<br>or's name. If |
| (For an explai  | nation of each typ  | e of claim, see the   | e instructions for this form in t   | he instru               | uction booklet.                              |  |                             |
|   |   |   |   |                         | Total claim                                  | Priority amount                                  | Nonpriority amount          |
| 2.1   |   |   |   |                         | \$3,510.00                                   | \$3,510.00                                       | \$0.00                      |
| Machi & Associ  |   |   | Last 4 digits of account nu   | mbor                    |  |  |                             |
| Priority Creditor's Nam<br>1521 N. Cooper<br>Number Street  |   |   | When was the debt incurre   |                         |  | _  |                             |
| Number Street   |   |   | As of the date you file, the  | claim is                | s: Check all that an                         | olv  |                             |
|   |   |   | Contingent  | Oldini i                | or or ook an trial ap                        | μ.,.   |                             |
| Arlington<br>City   | TX<br>State   | <b>76011</b> ZIP Code   | Unliquidated Disputed   |                         |  |  |                             |
| Who incurred the  |   |   | Type of PRIORITY unsecu   | red claii               | m:   |  |                             |
| Debtor 1 only   |   |   | Domestic support obliga   | itions                  |  |  |                             |
| Debtor 2 only Debtor 1 and D                                | Debtor 2 only   |   | Taxes and certain other   |                         |  | nent   |                             |
|   | the debtors and a   | another   | Claims for death or pers  | onai mji                | ury writte you were                          |  |                             |
|   | claim is for a con  | nmunity debt  | Other. Specify  |                         |  |  |                             |
| Is the claim subje  | ct to offset?   |   | Attorney fees for thi   | s case                  |  |  |                             |
| ✓ No<br>Yes   |   |   |   |                         |  |  |                             |

| Allen Chad Gross   | Case number (if known)   |  |
|--|--|--|
| List All of Your NONPRIORIT  | Y Unsecured Claims   |  |
| You have nothing to report in this part s  of your nonpriority unsecured claims litor has more than one nonpriority unseclaim it is. Do not list claims already incl | in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, is luded in Part 1. If more than one creditor holds a particular claim, list the other  | •  |
|  |  | Total claim  |
| e<br>ditor's Name<br>0000<br>treet   | Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  | \$500.00   |
| WA 98190-6000 State ZIP Code d the debt? Check one. only only and Debtor 2 only one of the debtors and another this claim is for a community debt subject to offset? | Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit Card  |  |
| LA 70004 State ZIP Code d the debt? Check one. only only and Debtor 2 only one of the debtors and another this claim is for a community debt subject to offset?      | Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card   | \$300.00   |
|  | List All of Your NONPRIORIT  creditors have nonpriority unsecured.  You have nothing to report in this part is portionally unsecured claims it is. Do not list claims already inclaim is for a zip Code debt check one.  LA 70004  State ZIP Code ditor's Name 25  treet  LA 70004  State ZIP Code debt check one.  only only and Debtor 2 only one of the debtors and another this claim is for a community debt inclaim is for a community debt this claim is for a community debt | List All of Your NONPRIORITY Unsecured Claims  creditors have nonpriority unsecured claims against you?  You have nothing to report in this part. Submit this form to the court with your other schedules.  Sof your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. For each claim list than one than one nonpriority unsecured claim, list the oreditor separately for each claim. For each claim listed, is idam it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other if more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Credit Card  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Credit Card  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim:  Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim:  Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Uniquidated Disputed  Type of NONPRIORITY unsecured claim: Contingent Conting |

| Debtor 1 Allen Chad Gross  | Case number (if known)  |             |
|--|---|-------------|
| Part 2: Your NONPRIORITY Unsecu  | red Claims Continuation Page  |             |
| After listing any entries on this page, number the previous page.                    | em sequentially from the  | Total claim |
| 4.3  |   | \$9,000.00  |
| ECMC Student Loans   | Last 4 digits of account number   |             |
| Nonpriority Creditor's Name P.O. Box 16408   | When was the debt incurred?   |             |
| Number Street  | As of the date you file, the claim is: Check all that apply.  |             |
|  | □ Contingent     □ Unliquidated   |             |
|  | ☐ Unliquidated ☐ Disputed   |             |
| St. Paul         MN         55116-0408           City         State         ZIP Code | Type of NONDRIGORITY unacquired claims  |             |
| Who incurred the debt? Check one.  | Type of NONPRIORITY unsecured claim:  |             |
| Debtor 1 only  | Obligations arising out of a separation agreement or divorce  |             |
| Debtor 2 only Debtor 1 and Debtor 2 only   | that you did not report as priority claims  |             |
| At least one of the debtors and another  | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify  |             |
| ☐ Check if this claim is for a community debt  | _ con opena,  |             |
| Is the claim subject to offset?  |   |             |
| ☑ No<br>□ Yes  |   |             |
|  |   |             |
| 4.4  |   | \$350.00    |
| NTTA Nonpriority Creditor's Name   | Last 4 digits of account number   |             |
| P.O. Box 260928  | When was the debt incurred?   |             |
| Number Street  | As of the date you file, the claim is: Check all that apply.  Contingent  |             |
|  | Unliquidated  |             |
| Plano TX 75026   | Disputed  |             |
| City State ZIP Code  | Type of NONPRIORITY unsecured claim:  |             |
| Who incurred the debt? Check one.  Debtor 1 only                                     | ☐ Student loans   |             |
| Debtor 2 only  | <ul> <li>Obligations arising out of a separation agreement or divorce<br/>that you did not report as priority claims</li> </ul> |             |
| Debtor 1 and Debtor 2 only   | Debts to pension or profit-sharing plans, and other similar debts   |             |
| At least one of the debtors and another  | ☑ Other. Specify  |             |
| Check if this claim is for a community debt  | Toll Fees   |             |
| Is the claim subject to offset?  ✓ No  |   |             |
| Yes  |   |             |
| 4.5  |   | •• •••      |
|  | Last A digita of appaunt number   | \$3,200.00  |
| Speedy Cash Nonpriority Creditor's Name  | Last 4 digits of account number<br>When was the debt incurred?  |             |
| 815 E Pioneer Pkwy Number Street   | As of the date you file, the claim is: Check all that apply.  |             |
| Number Street  | Contingent  |             |
|  | Unliquidated  |             |
| Arlington TX 76010   | Disputed  |             |
| City State ZIP Code  | Type of NONPRIORITY unsecured claim:  |             |
| Who incurred the debt? Check one.  Debtor 1 only                                     | Student loans   |             |
| Debtor 2 only  | <ul> <li>Obligations arising out of a separation agreement or divorce<br/>that you did not report as priority claims</li> </ul> |             |
| Debtor 1 and Debtor 2 only   | Debts to pension or profit-sharing plans, and other similar debts   |             |
| At least one of the debtors and another  | ☑ Other. Specify  |             |
| Check if this claim is for a community debt  | Pay Day Loan  |             |
| Is the claim subject to offset?  No  |   |             |
| Yes  |   |             |

| Allen Chad Gross  | Case number (if known)   |             |
|---|--|-------------|
| Part 2: Your NONPRIORITY Unsecu                                   | red Claims Continuation Page   |             |
| After listing any entries on this page, number the previous page. | em sequentially from the   | Total claim |
| 4.6   |  | \$4,200.00  |
| Wells Fargo Bank  | Last 4 digits of account number  |             |
| Nonpriority Creditor's Name                                       | When was the debt incurred?  |             |
| Number Street   | As of the date you file, the claim is: Check all that apply.                         |             |
|   | Contingent   |             |
|   | Unliquidated   |             |
| Arlington TX 76018  | Disputed   |             |
| City State ZIP Code   | Type of NONPRIORITY unsecured claim:   |             |
| Who incurred the debt? Check one.                                 | Student loans  |             |
| Debtor 1 only Debtor 2 only                                       | Obligations arising out of a separation agreement or divorce                         |             |
| Debtor 1 and Debtor 2 only  | that you did not report as priority claims   |             |
| At least one of the debtors and another                           | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify |             |
| Check if this claim is for a community debt                       | Negative Checking Account Balance  |             |
| Is the claim subject to offset?                                   |  |             |
| <b>☑</b> No   |  |             |
| Yes   |  |             |
| 4.7   |  | \$0.00      |
| Wells Fargo Home Mortgage   | Last 4 digits of account number  |             |
| Nonpriority Creditor's Name                                       | When was the debt incurred?  |             |
| P.O. Box 14411<br>Number Street                                   | As of the date you file, the claim is: Check all that apply.                         |             |
|   | Contingent   |             |
|   | Unliquidated   |             |
| Des Moines IA 50306-3411  | Disputed   |             |
| City State ZIP Code   | Type of NONPRIORITY unsecured claim:   |             |
| Who incurred the debt? Check one.                                 | Student loans  |             |
| Debtor 1 only Debtor 2 only                                       | Obligations arising out of a separation agreement or divorce                         |             |
| Debtor 1 and Debtor 2 only  | that you did not report as priority claims   |             |
| At least one of the debtors and another                           | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify |             |
| Check if this claim is for a community debt                       | Deficiency on Foreclosure  |             |
| Is the claim subject to offset?                                   | •  |             |
| <b>☑</b> No   |  |             |
| Yes   |  |             |

| Debtor 1 | Allen Chad Gross                                 | Case number (if known) |  |  |  |
|----------|--|------------------------|--|--|--|
| Part 4:  | Add the Amounts for Each Type of Unsecured Claim |                        |  |  |  |

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|                          |                                    |   |              | Total claim |
|--------------------------|------------------------------------|---|--------------|-------------|
| Total claims from Part 1 | 6a. Domestic support obligations 6 |   |              | \$0.00      |
|                          | 6b.                                | Taxes and certain other debts you owe the government  | 6b.          | \$0.00      |
|                          | 6c.                                | Claims for death or personal injury while you were intoxicated  | 6c.          | \$0.00      |
|                          | 6d.                                | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. <b>-</b> | \$3,510.00  |
|                          | 6e.                                | <b>Total.</b> Add lines 6a through 6d.  | 6d.          | \$3,510.00  |
|                          |                                    |   |              | Total claim |
| Total claims from Part 2 | 6f.                                | Student loans   | 6f.          | \$9,000.00  |
|                          | 6g.                                | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g.          | \$0.00      |
|                          | 6h.                                | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h.          | \$0.00      |
|                          | 6i.                                | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. <b>-</b> | \$8,550.00  |
|                          | 6j.                                | <b>Total.</b> Add lines 6f through 6i.  | 6j.          | \$17,550.00 |

| Fill in this inf   | Allen  | Chad   | Cross  |   |                |
|--|--|--|--|---|----------------|
| Debtor 1   | Allen<br>First Name  | Chad<br>Middle Name  | Gross<br>Last Name   |   |                |
| Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name  | Last Name  |   |                |
| United States Ba   | nkruptcy Court fo  | or the: NORTHERN DI  | ISTRICT OF TEXAS   |   |                |
| Case number (if known)   |  |  |  | ☐ Check if this is an amended filing  |                |
| Official Form  | 106G   |  |  |   |                |
|  |  |  |  |   |                |
| Be as complete a   | Executor   | possible. If two marrie<br>se is needed, copy the  |  | ther, both are equally responsible for supplying  | g              |
| Be as complete a<br>correct information  | : Executory nd accurate as pon. If more space                              | possible. If two marrie<br>se is needed, copy the  | d people are filing toge<br>additional page, fill it o<br>d case number (if know   | ther, both are equally responsible for supplying  | g              |
| Be as complete and correct information on the top of any  1. Do you have   | ck this box and f  | cossible. If two marries is needed, copy the set, write your name and contracts or unexpired file this form with the cou   | d people are filing toge additional page, fill it o d case number (if know leases?   | ther, both are equally responsible for supplying  | g<br>e.        |
| Be as complete and correct information on the top of any  1. Do you have  No. Che Yes. Fill  List separate is for (for example)                                  | check this box and fin all of the infor                                    | conssible. If two marries is needed, copy the as, write your name and contracts or unexpired file this form with the courmation below even if the or company with whom icle lease, cell phone).              | d people are filing toge additional page, fill it of case number (if know leases?  urt with your other schedule contracts or leases are myou have the contract   | ther, both are equally responsible for supplying ut, number the entries, and attach it to this pagen).  Iles. You have nothing else to report on this form.   | 06A/B).<br>ase |
| Be as complete an correct information on the top of any  1. Do you have  No. Che Yes. Fill  2. List separate is for (for exacted)                                | ck this box and fin all of the informaller, rent, vehiclers and unexpenses | conssible. If two marries is needed, copy the as, write your name and contracts or unexpired file this form with the courmation below even if the or company with whom icle lease, cell phone).              | d people are filing toge additional page, fill it of case number (if know leases?  urt with your other schedule contracts or leases are myou have the contract See the instructions for                  | ther, both are equally responsible for supplying the number the entries, and attach it to this pagen).  Iles. You have nothing else to report on this formalisted on Schedule A/B: Property (Official Form 10 to release. Then state what each contract or lease.   | g<br>e.        |
| Be as complete an correct information on the top of any  1. Do you have  No. Che Yes. Fill  2. List separate is for (for example executory correct information). | ck this box and fin all of the informaller, rent, vehiclers and unexpenses | cossible. If two marries is needed, copy the as, write your name and contracts or unexpired file this form with the courmation below even if the or company with whom icle lease, cell phone). Dired leases. | d people are filing toge additional page, fill it of case number (if know leases?  urt with your other schedule contracts or leases are myou have the contract See the instructions for entract or lease | ther, both are equally responsible for supplying the thing the entries, and attach it to this pagen).  Illes. You have nothing else to report on this formalisted on Schedule A/B: Property (Official Form 10 to rease. Then state what each contract or lease this form in the instruction booklet for more example. | g<br>e.        |

**76063** ZIP Code

ΤX

Mansfield City

| Fill i          | n this inf                               | ormation to  | identify your case                                  | e:                   |   |                      |  |
|-----------------|--|--|---|----------------------|---|----------------------|--|
| Debto           | or 1                                     | Allen  | Chad<br>Middle None                                 | Gro                  |   |                      |  |
| Date            | or 2                                     | First Name   | Middle Name   | Last                 | Name                                    |                      |  |
| Debto<br>(Spou  | or 2<br>ise, if filing)                  | First Name   | Middle Name   | Last                 | Name                                    |                      |  |
| United          | d States Ba                              | nkruptcy Court fo                                      | or the: <b>NORTHERN D</b>                           | DISTRIC <sup>*</sup> | T OF TEXAS                              |                      |  |
|                 | number                                   |  |   |                      |   |                      | Check if this is an  |
| (if kno         | own)                                     |  |   |                      |   |                      | amended filing   |
| Ott: -:         | :-! <b>-</b>                             | 40011  |   |                      |   |                      |  |
|                 | ial Form                                 |  | ahtara  |                      |   |                      | 42/  |
| Sche            | eaule H                                  | : Your Cod   | eptors  |                      |   |                      | 12/  |
| needed<br>page. | d, copy the On the top O you have        | Additional Page  | e, fill it out, and numbe<br>al Pages, write your n | er the ent           | tries in the boxes<br>case number (if I | on the<br>known)     | ct information. If more space is left. Attach the Additional Page to this . Answer every question.  as a codebtor.)      |
|                 | clude Arizor No. Go Yes. Did No Ves. Ves | na, California, Ida<br>to line 3.<br>I your spouse, fo | -   | n, New Me            | exico, Puerto Rico,                     | Texas, e time?       | (Community property states and territories Washington, and Wisconsin.)  In the name and current address of that person.  |
|                 |  | na K Gross   |   |                      |   |                      |  |
|                 | <u>561</u>                               | l6 Autumn Wh   | ormer spouse, or legal equi<br>eat Trail            | valent               |   |                      |  |
|                 | Nun                                      | nber Street  |   |                      |   |                      |  |
|                 |  | ington   |   | X                    | 76017                                   |                      |  |
|                 | City                                     |  | S   | itate                | ZIP Code                                |                      |  |
| pe<br>cr        | erson show<br>editor on S                | n in line 2 agair<br>Schedule D (Offi                  | n as a codebtor only if                             | that persedule E/F   | son is a guaranto<br>(Official Form 10  | r or co              | f your spouse is filing with you. List the signer. Make sure you have listed the or Schedule G (Official Form 106G). Use |
|                 | Column 1:                                | Your codebtor  | •   |                      |   | Co                   | olumn 2: The creditor to whom you owe the debt   |
|                 |  |  |   |                      |   | Ch                   | eck all schedules that apply:  |
| 3.1             | Gross, J                                 | ana K  |   |                      |   | ·  \overline{\sigma} | Schedule D, line 2.2   |
|                 | Name <b>5616 Aut</b>                     | umn Wheat Tr   | ail   |                      |   | . r                  | Schedule E/F, line   |
|                 | Number                                   | Street   |   |                      |   |                      | Schedule G, line   |
|                 | Arlingtor                                | <u> </u>   | TX  | 760                  | 117                                     | · L                  | Dorado   |
|                 | Arlingtor<br>Citv                        | •  | State   |                      | Code                                    | •                    |  |

| Debtor 1 | Allen Chad Gross   |             | _ Case number (if known) |   |  |  |  |
|----------|--|-------------|--------------------------|---|--|--|--|
|          | Additional Page to Lis   | t More Code | ebtors                   |   |  |  |  |
| C        | column 1: Your codebtor  |             |                          | Column 2: The creditor to whom you owe the debt |  |  |  |
|          |  |             |                          | Check all schedules that apply:                 |  |  |  |
| <u>5</u> | iross, Jana K<br>ame<br>616 Autumn Wheat Trail<br>umber Street |             |                          | — Schedule D, line  Schedule E/F, line4.6       |  |  |  |
|          | rlington<br>ity  | TX<br>State | <b>76017</b> ZIP Code    | Schedule G, line Wells Fargo Bank               |  |  |  |
| <u>N</u> | iross, Jana K<br>ame<br>616 Autumn Wheat Trail<br>umber Street |             |                          | Schedule D, line  Schedule E/F, line 4.7        |  |  |  |
|          | rlington   | TX<br>State | <b>76017</b> ZIP Code    | Schedule G, line Wells Fargo Home Mortgage      |  |  |  |

| Fill in this infor   | Allen<br>First Name                | Chad<br>Middle Name                    | Gross<br>Last Name  | Check if this is:   |
|--|------------------------------------|--|---|---|
| Debtor 2<br>(Spouse, if filing)<br>United States Banl<br>Case number<br>(if known) | First Name<br>kruptcy Court for th | Middle Name<br>ne: NORTHERN DIS        | Last Name STRICT OF TEXAS                                   | An amended filing  A supplement showing postpetition chapter 13 income as of the following date:  MM / DD / YYYY  |
| Official Form 1 Schedule I: Yo   |                                    |  |   | 12/15   |
| responsible for supp   | lying correct info                 | rmation. If you are me. If you are me. | arried and not filing jointly<br>d and your spouse is not t | ebtor 1 and Debtor 2), both are equally<br>, and your spouse is living with you,<br>illing with you, do not include information<br>h the top of any additional pages, write |

Fill in your employment information. Debtor 1 Debtor 2 or non-filing spouse If you have more than one **Employment status** ✓ Employed ☐ Employed job, attach a separate page with information about ■ Not employed ✓ Not employed additional employers. Occupation **Operations Manager** Disabled Include part-time, seasonal, Employer's name Fire Safety Solutions or self-employed work. Occupation may include 3320 Towerwood Dr. **Employer's address** student or homemaker, if it Number Street Number Street applies. **Farmers Branch** 75234 TX

State Zip Code

City

State Zip Code

Give Details About Monthly Income

Part 2:

How long employed there?

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

13 Years

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

|    |   |      | For Deptor 1 | non-filing spouse |
|----|---|------|--------------|-------------------|
| 2. | List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2.   | \$8,333.33   | \$0.00            |
| 3. | Estimate and list monthly overtime pay.   | 3. + | \$0.00       | \$0.00            |
| 4. | Calculate gross income. Add line 2 + line 3.  | 4.   | \$8,333.33   | \$0.00            |

Official Form 106l Schedule I: Your Income page 1

| Deb | tor 1 | Allen Chad Gross   |              | Case num               | nbei | r (if knowr | 1)       |          |                         |
|-----|-------|--|--------------|------------------------|------|-------------|----------|----------|-------------------------|
|     |       |  |              | For Debtor 1           |      | or Debtor   |          | <b>.</b> |                         |
|     | Cop   | by line 4 here   | 4.           | \$8,333.33             | _    | \$          | 0.00     | _        |                         |
| 5.  | List  | all payroll deductions:  |              |                        |      |             |          |          |                         |
|     |       | Tax, Medicare, and Social Security deductions  | 5a.          | <u>\$1,952.43</u>      |      |             | 0.00     |          |                         |
|     |       | Mandatory contributions for retirement plans   | 5b.          | \$0.00                 |      |             | 0.00     |          |                         |
|     | 5c.   | Voluntary contributions for retirement plans   | 5c.          | \$0.00                 |      | <del></del> | 0.00     |          |                         |
|     | 5d.   | Required repayments of retirement fund loans   | 5d.          | \$0.00                 |      | :           | 0.00     |          |                         |
|     | 5e.   | Insurance  | 5e.          | \$427.96               |      |             | 0.00     |          |                         |
|     | 5f.   | Domestic support obligations   | 5f.          | \$0.00                 |      |             | 0.00     |          |                         |
|     | 5g.   |  | 5g.          | \$0.00                 |      |             | 0.00     |          |                         |
|     | 5h.   | Other deductions. Specify:   | 5h. <b>-</b> | \$0.00                 |      | \$          | 0.00     |          |                         |
| 6.  |       | I the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h.  | 6.           | \$2,380.39             |      | \$          | 0.00     |          |                         |
| 7.  | Cald  | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.           | \$5,952.94             |      | \$          | 0.00     |          |                         |
| 8.  | List  | all other income regularly received:   |              |                        |      |             |          |          |                         |
|     | 8a.   | Net income from rental property and from operating a business, profession, or farm   | 8a.          | \$0.00                 |      | \$          | 0.00     |          |                         |
|     |       | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  |              |                        |      |             |          |          |                         |
|     | 8b.   | Interest and dividends   | 8b.          | \$0.00                 |      | \$          | 0.00     |          |                         |
|     | 8c.   | Family support payments that you, a non-filing spouse, or a dependent regularly receive  | 8c.          | \$0.00                 |      | \$          | 0.00     |          |                         |
|     |       | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   |              |                        |      |             |          |          |                         |
|     | 8d.   | Unemployment compensation  | 8d.          | \$0.00                 |      | \$          | 0.00     |          |                         |
|     | 8e.   | Social Security  | 8e.          | \$0.00                 |      |             | 31.00    |          |                         |
|     | 8f.   | Other government assistance that you regularly receive   |              |                        |      |             |          |          |                         |
|     |       | Include cash assistance and the value (if known) or any non-<br>cash assistance that you receive, such as food stamps<br>(benefits under the Supplemental Nutrition Assistance Program)<br>or housing subsidies. |              |                        |      |             |          |          |                         |
|     |       | Specify:   | 8f.          | \$0.00                 |      | \$          | 0.00     |          |                         |
|     | 8g.   | Pension or retirement income   | -<br>8g.     | \$0.00                 |      |             | 0.00     |          |                         |
|     | 8h.   | Other monthly income.<br>Specify:  | 8h. 🖣        | \$0.00                 |      |             | 0.00     |          |                         |
| 9.  | Add   | l all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.   | 9.           | \$0.00                 |      | \$68        | 31.00    |          |                         |
| 10. |       | culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.          | \$5,952.94             | +[   | \$68        | 31.00    | ]=[      | \$6,633.94              |
| 11. |       | te all other regular contributions to the expenses that you list in S  | chedu        | ıle J.                 |      |             |          |          |                         |
|     | Incl  | ude contributions from an unmarried partner, members of your househ<br>nds or relatives.   |              |                        | r ro | ommates,    | and ot   | her      |                         |
|     | Dor   | not include any amounts already included in lines 2-10 or amounts tha  | t are r      | not available to pay e | xpe  | nses liste  | ed in Sc | hed      | ule J.                  |
|     | Spe   | cify:  |              |                        |      |             | 11.      | +        | \$0.00                  |
| 12. |       | I the amount in the last column of line 10 to the amount in line 11.  me. Write that amount on the Summary of Your Assets and Liabilities  |              |                        |      |             | 12.      |          | \$6,633.94              |
| 12  |       | applies.   | hio fc       | rm2                    |      |             |          |          | Combined monthly income |
| 13. |       | you expect an increase or decrease within the year after you file to No.  No.  No.   | 1115 10      | 11111                  |      |             |          |          |                         |
|     |       | No. Yes. Explain:  |              |                        |      |             |          |          |                         |
|     |       |  |              |                        |      |             |          |          |                         |

| F         | ill in this inform                                  | ation to ident      | ify your case:  |                 |  | Cho      | ak if this  | , io:           |                 |          |
|-----------|---|---------------------|---|-----------------|--|----------|---|-----------------|-----------------|----------|
|           | Debtor 1  | Allen<br>First Name | <b>Chad</b><br>Middle Name  | Gros<br>Last Na |  |          |   | ended filing    | postpetition    |          |
|           | Debtor 2<br>(Spouse, if filing)                     |                     |   |                 |  | -        | A supplement showing postpetition chapter 13 expenses as of the following date: |                 |                 |          |
|           |   |                     |   |                 |  |          |   |                 |                 |          |
|           | United States Bankro Case number                    | upicy Court for the | e. <u>NORTHERN DI</u>   | STRICT O        | F IEAAS                                |          | MM / D  | D / YYYY        |                 |          |
|           | (if known)  |                     |   |                 |  |          |   |                 |                 |          |
| <u>Of</u> | ficial Form 10                                      | <u>6J</u>           |   |                 |  |          |   |                 |                 |          |
| Sc        | hedule J: Yo  | ur Expense          | es  |                 |  |          |   |                 | 12/             | 15       |
| cor       | rect information. If                                | more space is n     | ole. If two married po<br>eeded, attach anotho<br>swer every question | er sheet to     |  |          |   |                 |                 |          |
| P         | art 1: Descri                                       | be Your Hous        | ehold   |                 |  |          |   |                 |                 |          |
| 1.        | Is this a joint case                                | ?                   |   |                 |  |          |   |                 |                 |          |
|           | No<br>□ Yes   | ebtor 2 live in a s | separate household?   |                 | es for Separate House                  | ehold of | Debtor  | 2.              |                 |          |
| 2.        | Do you have depe                                    |                     | No<br>Yes. Fill out this in   |                 | Dependent's relat<br>Debtor 1 or Debto |          | o to  | Dependent's age | Does depende    |          |
|           | Debtor 2.   |                     | for each dependent  | t               | Son                                    |          |   | 20              | No No           | _        |
|           | Do not state the de                                 | pendents'           |   |                 |  |          |   |                 | - ☑ Yes<br>□ No |          |
|           | names.  |                     |   |                 | Son                                    |          |   | 18              | - ☑ Yes         |          |
|           |   |                     |   |                 |  |          |   |                 | □ No<br>- □ Yes |          |
|           |   |                     |   |                 |  |          |   |                 | □ No            |          |
|           |   |                     |   |                 |  |          |   |                 | Yes             |          |
|           |   |                     |   |                 |  |          |   |                 | □ No<br>- □ Yes |          |
| 3.        | Do your expenses expenses of peop yourself and your | le other than       | ✓ No<br>□ Yes   |                 |  |          |   |                 |                 |          |
| P         | art 2: Estima                                       | ite Your Ongo       | ing Monthly Exp   | enses           |  |          |   |                 |                 |          |
| to ı      |   | of a date after the | kruptcy filing date u<br>e bankruptcy is filed                        | -               | -                                      |          | -   | -               |                 |          |
|           |   |                     | sh government assis<br>n Schedule I: Your I                           | -               |  |          |   | Your expens     | ses             |          |
| 4.        |   |                     | enses for your resid  |                 |  |          | 4   | 4.              | \$1,600.0       | <u>0</u> |
|           | If not included in                                  | line 4:             |   |                 |  |          |   |                 |                 |          |
|           | 4a. Real estate ta                                  | xes                 |   |                 |  |          |   | 4a              |                 | _        |
|           | 4b. Property, hom                                   | neowner's, or rente | er's insurance  |                 |  |          |   | 4b              |                 | _        |
|           | 4c. Home mainter                                    | nance, repair, and  | l upkeep expenses   |                 |  |          |   | 4c              | \$65.0          | 0        |
|           | 4d. Homeowner's                                     | association or co   | ndominium dues  |                 |  |          |   | 4d.             |                 |          |

| Deb | otor 1 Allen Chad Gross   | Case number (if known) |  |
|-----|---|------------------------|--|
|     |   | Your expens            | ses                                    |
| 5.  | Additional mortgage payments for your residence, such as home equity loans  | 5.                     |  |
| 6.  | Utilities:  |                        |  |
|     | 6a. Electricity, heat, natural gas  | 6a                     | \$375.00                               |
|     | 6b. Water, sewer, garbage collection  | 6b                     | \$80.00                                |
|     | Telephone, cell phone, Internet, satellite, and cable services  | 6c                     | \$450.00                               |
|     | 6d. Other. Specify:   | 6d.                    |  |
| 7.  | Food and housekeeping supplies  | 7.                     | \$1,200.00                             |
| 8.  | Childcare and children's education costs  | 8.                     |  |
| 9.  | Clothing, laundry, and dry cleaning   | 9.                     | \$100.00                               |
| 10. | Personal care products and services   | 10.                    | \$100.00                               |
| 11. | Medical and dental expenses   | 11.                    | \$25.00                                |
| 12. | <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.  | 12.                    | \$200.00                               |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.                    | \$100.00                               |
| 14. | Charitable contributions and religious donations  | 14.                    | \$400.00                               |
| 15. | Insurance.  |                        |  |
|     | Do not include insurance deducted from your pay or included in lines 4 or 20.   | 4.5                    |  |
|     | 15a. Life insurance   | 15a                    |  |
|     | 15b. Health insurance   | 15b                    | ************************************** |
|     | 15c. Vehicle insurance  | 15c                    | \$342.00                               |
| 16  | <ul><li>15d. Other insurance. Specify:</li><li>Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.</li></ul>                     | 15d                    |  |
| 10. | Specify:  | 16.                    |  |
| 17. | Installment or lease payments:  |                        |  |
|     | 17a. Car payments for Vehicle 1   | 17a                    |  |
|     | 17b. Car payments for Vehicle 2   | 17b                    |  |
|     | 17c. Other. Specify:  | 17c                    |  |
|     | 17d. Other. Specify:  | 17d                    |  |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.                    |  |
| 19. | Other payments you make to support others who do not live with you.   | 40                     | \$040.00                               |
|     | Specify: Daughter's Rent at College   | 19.                    | <b>\$619.00</b>                        |

| Debtor 1  |            | Allen Chad Gross  | Case number (if known) |            |  |  |
|---|------------|---|------------------------|------------|--|--|
| 20.   |            | r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.   |                        |            |  |  |
|   | 20a.       | Mortgages on other property   | 20a.                   |            |  |  |
|   | 20b.       | Real estate taxes   | 20b.                   |            |  |  |
|   | 20c.       | Property, homeowner's, or renter's insurance  | 20c.                   |            |  |  |
|   | 20d.       | Maintenance, repair, and upkeep expenses  | 20d.                   | _          |  |  |
|   | 20e.       | Homeowner's association or condominium dues   | 20e.                   |            |  |  |
| 21.   | Other      | r. Specify: Pet Expense   | 21. +                  | \$150.00   |  |  |
| 22.   | Calcu      | ulate your monthly expenses.  | _                      |            |  |  |
|   | 22a.       | Add lines 4 through 21.   | 22a.                   | \$5,806.00 |  |  |
|   | 22b.       | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2                 | 2. 22b.                |            |  |  |
|   | 22c.       | Add line 22a and 22b. The result is your monthly expenses.                                      | 22c.                   | \$5,806.00 |  |  |
| 23.   | Calcu      | ulate your monthly net income.  |                        |            |  |  |
|   | 23a.       | Copy line 12 (your combined monthly income) from Schedule I.                                    | 23a.                   | \$6,633.94 |  |  |
|   | 23b.       | Copy your monthly expenses from line 22c above.   | 23b. <b>–</b>          | \$5,806.00 |  |  |
|   | 23c.       | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c.                   | \$827.94   |  |  |
| 24.   | Do yo      | ou expect an increase or decrease in your expenses within the year after yo                     | ou file this form?     |            |  |  |
| For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? |            |   |                        |            |  |  |
|   | <u> </u>   | No.   |                        |            |  |  |
|   | <b>☑</b> ` | Yes. Explain here: Daughter graduates August 2019   |                        |            |  |  |
|   |            | _ aagc. g.aaaaaco / agaco _c.c.   |                        |            |  |  |
|   |            |   |                        |            |  |  |

| Debtor 1                            | Allen                  | Chad  | Gross   |  |                                    |
|-------------------------------------|------------------------|---|---|--|------------------------------------|
| Dobtor !                            | First Name             | Middle Name                                   | Last Name   | -  |                                    |
| Debtor 2                            |                        |   |   |  |                                    |
| (Spouse, if filing                  | g) First Name          | Middle Name                                   | Last Name   | _  |                                    |
| United States E                     | 3ankruptcy Court fo    | or the: <b>NORTHERN D</b>                     | DISTRICT OF TEXAS   | _  |                                    |
| Case number (if known)              |                        |   |   | ☐ Check if t   |                                    |
| Official Forr                       | m 106Sum               |   |   | _  | -                                  |
| Summary (                           | of Your Ass            | ets and Liabilit                              | ies and Certain Sta   | atistical Information  | 12/1                               |
| correct informat<br>schedules after | tion. Fill out all of  | your schedules first;<br>inal forms, you must | then complete the informati                                     | , both are equally responsible for ion on this form. If you are filing a check the box at the top of this pa | amended                            |
|                                     |                        |   |   |  | our assets                         |
| I. Schedule A                       | /B: Property (Offici   | al Form 1064/P)                               |   | V  | alue of what you own               |
|                                     | , , ,                  | ,   | _   |  | \$1,000.00                         |
| 1a. Copy li                         | ne 55, Total real es   | state, from Schedule A                        | /B  |  | \$1,000.00                         |
| 1b. Copy li                         | ine 62, Total perso    | nal property, from Sche                       | edule A/B   |  | \$45,051.00                        |
| 1c. Copy li                         | ine 63, Total of all p | property on Schedule A                        | v/B   |  | \$46,051.00                        |
| Part 2: S                           | Summarize You          | r Liabilities                                 |   |  |                                    |
|                                     |                        |   |   |  | Your liabilities<br>Amount you owe |
|                                     |                        | •   | Property (Official Form 106D) f claim, at the bottom of the las | )<br>st page of Part 1 of Schedule D   | \$38,559.00                        |
|                                     |                        |   | s (Official Form 106E/F)<br>ured claims) from line 6e of Sc     | chedule E/F  | \$3,510.00                         |
|                                     |                        |   |   |  | \$17,550.00                        |
| 3a. Copy tl                         | he total claims from   | n Part 2 (nonpriority un                      | secured claims) from line 6i of                                 | Schedule E/E   | ų ,                                |
| 3a. Copy tl                         | he total claims fron   | n Part 2 (nonpriority un                      | secured claims) from line 6j of                                 | Schedule E/F   |                                    |
| 3a. Copy tl                         | he total claims fron   | n Part 2 (nonpriority un                      | secured claims) from line 6j of                                 | Your total liabilities   |                                    |
| 3a. Copy tl                         | he total claims fron   | n Part 2 (nonpriority un                      | secured claims) from line 6j of                                 | Г  |                                    |
| 3a. Copy tl                         |                        | n Part 2 (nonpriority un                      | , , ,   | Г  | \$59,619.00                        |

Schedule J: Your Expenses (Official Form 106J)

\$5,806.00

| Debtor 1  |  | Allen Chad Gross Case nur  | per (if known)            |                  |  |  |
|---|--|--|---------------------------|------------------|--|--|
| Part 4: Answer These Questions for Administrative and Statistical Records |  |  |                           |                  |  |  |
| 6.  | . Are you filing for bankruptcy under Chapters 7, 11, or 13?   |  |                           |                  |  |  |
|   | <ul> <li>No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> <li>✓ Yes</li> </ul>  |  |                           |                  |  |  |
| 7. What kind of debt do you have?   |  |  |                           |                  |  |  |
|   | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. |  |                           |                  |  |  |
|   |  | <b>Dur debts are not primarily consumer debts.</b> You have nothing to report on this parties form to the court with your other schedules. | t of the form. Check this | s box and submit |  |  |
| 8.  | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.   |  |                           |                  |  |  |
| 9.  | 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:  |  |                           |                  |  |  |
|   |  |  | Total claim               |                  |  |  |
| From Part 4 on Schedule E/F, copy the following:                          |  |  |                           |                  |  |  |
|   | 9a. Do   | omestic support obligations. (Copy line 6a.)   | \$0.0                     | <u>0</u>         |  |  |
|   | 9b. Ta   | axes and certain other debts you owe the government. (Copy line 6b.)   | \$0.0                     | <u>0</u>         |  |  |
|   | 9c. Cl   | aims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$0.0                     | <u>0</u>         |  |  |
|   | 9d. St   | cudent loans. (Copy line 6f.)  | \$9,000.0                 | <u>0</u>         |  |  |
|   | 9e. O  | bligations arising out of a separation agreement or divorce that you did not report as   | \$0.0                     | 0                |  |  |

priority claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

\$9,000.00

| Fill in this in  | nformation to i   |  |   |   |
|--|---|--|---|---|
| Debtor 1   |   | dentify your case                            | :   |   |
| ו ווספטנטו ו   | Allen   | Chad   | Gross   |   |
|  | First Name  | Middle Name                                  | Last Name   | _   |
| Debtor 2   | \ <del>=</del>  |  |   | _   |
| (Spouse, if filing                                       | g) First Name   | Middle Name                                  | Last Name   |   |
| United States E  | Sankruptcy Court fo   | or the: <b>NORTHERN D</b>                    | DISTRICT OF TEXAS   | _   |
| Case number  |   |  |   | Check if this is an   |
| (if known)   |   |  |   | amended filing  |
| Official Forr  | m 106Dec  |  |   |   |
|  |   | ndividual Dabt                               | tor's Schedules   | 12/15   |
| Deciaration  | i About an i  | ndividuai Debi                               | ior s scriedules  | 12/13   |
| You must file the  | is form whenever  | VALLETIA HANKFLINTOV S                       |   |   |
| concealing prop<br>\$250,000, or imp                     | erty, or obtaining  | money or property b                          |   | dules. Making a false statement,<br>a bankruptcy case can result in fines up to<br>9, and 3571. |
| concealing prop<br>\$250,000, or imp                     | erty, or obtaining<br>orisonment for up<br>ign Below                        | money or property b<br>to 20 years, or both. | y fraud in connection with a<br>18 U.S.C. §§ 152, 1341, 151 | a bankruptcy case can result in fines up to<br>9, and 3571.                                     |
| concealing prop<br>\$250,000, or imp                     | erty, or obtaining<br>orisonment for up<br>ign Below                        | money or property b<br>to 20 years, or both. | y fraud in connection with a                                | a bankruptcy case can result in fines up to<br>9, and 3571.                                     |
| concealing prop<br>\$250,000, or imp<br>S<br>Did you pay | erty, or obtaining<br>orisonment for up<br>ign Below<br>y or agree to pay s | money or property b<br>to 20 years, or both. | y fraud in connection with a<br>18 U.S.C. §§ 152, 1341, 151 | a bankruptcy case can result in fines up to 9, and 3571.  out bankruptcy forms?                 |
| concealing prop<br>\$250,000, or imp<br>S<br>Did you pay | erty, or obtaining<br>orisonment for up<br>ign Below                        | money or property b<br>to 20 years, or both. | y fraud in connection with a<br>18 U.S.C. §§ 152, 1341, 151 | a bankruptcy case can result in fines up to<br>9, and 3571.                                     |

Signature of Debtor 2

MM / DD / YYYY

Date

X /s/ Allen Chad Gross
Allen Chad Gross, Debtor 1

Date 10/25/2018

MM / DD / YYYY

| Debtor 1   | Allen<br>First Name   | Chad<br>Middle Nam                        | e  | Gross<br>Last Name                            |   |        |  |
|--|---|---|--|---|---|--------|--|
| Debtor 2   |   |   |  |   |   |        |  |
| (Spouse, if filing   | First Name  | Middle Nam                                | е  | Last Name                                     |   |        |  |
| United States Ba   | nkruptcy Court fo   | or the: NORTHE                            | RN DIS                                       | TRICT OF TE                                   | EXAS  |        |  |
| Case number<br>(if known)  |   |   |  |   | _   | _      | if this is an<br>ed filing                   |
| Official Form  | 107   |   |  |   |   |        |  |
|  |   | Affairs for                               | r Indiv                                      | iduals Fil                                    | ing for Bank  | ruptcv | 04/16  |
|  | ve Details Ab   | ,   |  |   | ere You Lived E   | 3efore |  |
| Part 1: Gi  What is your Married Not marr  During the la   | ve Details Ab current marital fed ast 3 years, have                                   | out Your Mar<br>status?                   | ital Sta                                     | tus and Wh                                    | you live now?   |        |  |
| Part 1: Gi  What is your Married Not marr  During the la   | ve Details Ab current marital ed ast 3 years, have                                    | out Your Mar<br>status?                   | here otherast 3 year                         | er than where rs. Do not include              |   |        | Dates Debtor 2                               |
| Part 1: Gi  What is your Married Not marr  During the la   | ve Details Ab current marital ed ast 3 years, have                                    | out Your Mar<br>status?                   | here otherast 3 year                         | er than where rs. Do not include              | you live now?<br>ude where you live n                       | iow.   | Dates Debtor 2 lived there  Same as Debtor 1 |
| Part 1: Gi  What is your Married Not marr  During the late of the  | ve Details Ab current marital ed ast 3 years, have                                    | out Your Mar<br>status?                   | here otherast 3 year                         | er than where rs. Do not inclu Debtor 1 there | you live now?<br>ude where you live n<br>Debtor 2:          | iow.   | lived there                                  |
| Part 1: Gi  What is your Married Not marr  During the later of the lat | ve Details Ab current marital ed ast 3 years, have                                    | out Your Mar<br>status?                   | here other<br>ast 3 year<br>Dates<br>lived t | er than where rs. Do not include              | you live now?<br>ude where you live n<br>Debtor 2:          | iow.   | lived there  Same as Debtor 1                |
| Part 1: Gi  What is your Married Not marr  During the later of the lat | ve Details Ab current marital fed ast 3 years, have all of the places an Court Street | out Your Mar<br>status?<br>you lived anyw | here others ast 3 year Dates lived t         | er than where rs. Do not include there        | you live now?  ude where you live n  Debtor 2:  Same as Deb | iow.   | lived there Same as Debtor 1                 |

| Debtor 1                             | Allen Chad Gross  |   | Case nur  | mber (if known)   |  |
|--------------------------------------|---|---|---|---|--|
| Part 2:                              | Explain the Sources of  | Your Income   |   |   |  |
| <b>4. Did yo</b><br>Fill in t        | u have any income from employing total amount of income you receive filing a joint case and you have  | ment or from operating a beived from all jobs and all bu                              | ısinesses, including par  | t-time activities.  | llendar years?   |
| □ No<br>☑ Ye                         | s. Fill in the details.   |   |   |   |  |
|                                      |   | Debtor 1  |   | Debtor 2  |  |
|                                      |   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions<br>and exclusions                            | Sources of income<br>Check all that apply.                    | Gross income<br>(before deductions<br>and exclusions                     |
|                                      | ary 1 of the current year until<br>u filed for bankruptcy:  | ₩ages, commissions, bonuses, tips   | \$89,693.00   | Wages, commissions, bonuses, tips                             |  |
|                                      |   | Operating a business  |   | Operating a business  |  |
| For the last                         | calendar year:  | Wages, commissions, bonuses, tips   | \$91,727.00   | Wages, commissions, bonuses, tips                             |  |
| (January 1 t                         | o December 31,  | Operating a business  |   | Operating a business  |  |
| For the cale                         | endar year before that:   | Wages, commissions, bonuses, tips   | \$122,757.00  | Wages, commissions, bonuses, tips                             |  |
| (January 1 t                         | o December 31, <u><b>2016</b></u> )   | Operating a business  |   | Operating a business  |  |
| Include<br>unemp<br>and ga<br>Debtor | u receive any other income during income regardless of whether that loyment; and other public benefit publing and lottery winnings. If you 1. | t income is taxable. Examp sayments; pensions; rental in a re in a joint case and you | les of other income are<br>ncome; interest; dividend<br>have income that you re | ds; money collected from la<br>eceived together, list it only | awsuits; royalties;  |
| □ No<br>☑ Ye                         | s. Fill in the details.   |   |   |   |  |
|                                      |   | Debtor 1  |   | Debtor 2  |  |
|                                      |   | Sources of income<br>Describe below.  | Gross income<br>from each source<br>(before deductions<br>and exclusions        | Sources of income<br>Describe below.                          | Gross income<br>from each source<br>(before deductions<br>and exclusions |
|                                      | ary 1 of the current year until u filed for bankruptcy:   |   |   |   |  |
|                                      |   |   |   |   |  |
|                                      | calendar year: o December 31, 2017 )  |   |   |   |  |
|                                      | endar year before that: o December 31, 2016 )   |   |   |   |  |

| Deb     | otor 1                             | Allen Chad Gross                                  |   |                                   |   | Case number (if know   | vn)  |   |
|---------|------------------------------------|---|---|-----------------------------------|---|--|--|---|
| Р       | art 3:                             | List Certain Pay                                  | ments You Ma  | ade Before \                      | ∕ou Filed for Ba                            | nkruptcy   |  |   |
| 6.      | Are eith                           | er Debtor 1's or Debto                            | or 2's debts prima  | arily consumer                    | debts?                                      |  |  |   |
|         | □ No.                              | Neither Debtor 1 no                               | •   | •                                 |   |  | d in 11 U.S.C. § 101(8) as   |   |
|         |                                    | During the 90 days b                              | pefore you filed for  | bankruptcy, di                    | d you pay any credit                        | or a total of \$6,425*   | or more?   |   |
|         |                                    | ☐ No. Go to line 7.                               |   |                                   |   |  |  |   |
|         |                                    | total amour                                       | nt you paid that cre  | editor. Do not in                 | nclude payments for                         | nore in one or more produced to domestic support of attorney for this bank | oligations, such as  |   |
|         |                                    | * Subject to adjustm                              | ent on 4/01/19 and  | d every 3 years                   | after that for cases                        | filed on or after the o  | late of adjustment.  |   |
|         | ✓ Yes.                             | Debtor 1 or Debtor                                | 2 or both have pr   | rimarily consu                    | mer debts.                                  |  |  |   |
|         |                                    | During the 90 days b                              | pefore you filed for  | bankruptcy, di                    | d you pay any credit                        | or a total of \$600 or   | more?  |   |
|         |                                    | ☐ No. Go to line 7.                               |   |                                   |   |  |  |   |
|         |                                    |   | o not include payr  | nents for dome                    |   | ons, such as child su  |  |   |
|         |                                    |   |   | Dates of payment                  | Total amount paid                           | Amount you still owe   | Was this payment for   |   |
|         | Smart (                            | Car   |   | _                                 | \$1,500.00                                  | \$35,000.00  | _ Mortgage   |   |
| 624     | litor's name<br>N. Wats            | son   |   | last 90 day                       | /S  |  |  |   |
| Num     | ber Stre                           | et  |   | _                                 |   |  | ☐ Loan repayment   |   |
|         |                                    |   |   | _                                 |   |  | Suppliers or vendors   |   |
|         | ington                             | TX  | 76011   | _                                 |   |  | Other  |   |
| City 7. | Insiders<br>corporati<br>agent, in | include your relatives;<br>ons of which you are a | for bankruptcy,<br>any general partn<br>in officer, director,<br>less you operate a | ers; relatives of person in conti | any general partner<br>rol, or owner of 20% | rs; partnerships of whor more of their votin                               | who was an insider? nich you are a general partner; ng securities; and any managing s for domestic support obligations | ; |
|         | سنا                                | List all payments to a                            | n insider.  |                                   |   |  |  |   |

| Deb         | otor 1                | Allen Chad Gro  | oss         |                            | Case number (i  | f known)           |                                   |
|-------------|-----------------------|---|-------------|----------------------------|---|--------------------|-----------------------------------|
| 8.          | benefit               | 1 year before you ed an insider?                          |             |                            | d you make any payments or transfer any pro   | perty on account   | of a debt that                    |
|             | ✓ No                  | s. List all payment                                       | s that be   | nefited an inside          | r.  |                    |                                   |
|             |                       |   |             |                            |   |                    |                                   |
| Р           | art 4:                | Identify Leg  | al Actio    | ons, Reposse               | essions, and Foreclosures   |                    |                                   |
| 9.          | List all              |   | iding per   | sonal injury case          | ere you a party in any lawsuit, court action, o<br>es, small claims actions, divorces, collection suite | -                  | -                                 |
|             | ✓ No                  | s. Fill in the details                                    | S.          |                            |   |                    |                                   |
| 10.         | seized                | 1 year before you<br>, or levied?<br>all that apply and f |             |                            | as any of your property repossessed, foreclo  | sed, garnished, a  | ttached,                          |
|             |                       | . Go to line 11.<br>s. Fill in the inform                 | nation bel  | ow.                        |   |                    |                                   |
|             | ) Smart               |   |             |                            | Describe the property<br>2013 Ford F-150  | Date<br>10/17/2018 | Value of the property \$22,450.00 |
|             | 1 N. Wat              |   |             |                            |   |                    |                                   |
|             |                       | reet  |             |                            | Explain what happened   |                    |                                   |
|             |                       |   |             |                            | ✓ Property was repossessed.   |                    |                                   |
|             |                       |   |             |                            | Property was foreclosed.  |                    |                                   |
|             | ington                |   | TX          | 76011                      | Property was garnished.   |                    |                                   |
| City        |                       |   | State       | ZIP Code                   | Property was attached, seized, or levied.   |                    |                                   |
|             |                       |   |             |                            | Describe the property   | Date               | Value of the property             |
|             | MC Stu<br>ditor's Nam | dent Loans  |             |                            | Garnished wages   | 04/2018            | \$4,213.00                        |
| P.C         | ). Box 1              | 6408  |             |                            |   |                    |                                   |
| Nun         | nber Sti              | reet  |             |                            | Explain what happened   |                    |                                   |
|             |                       |   |             |                            | Property was repossessed.  Property was foreclosed.   |                    |                                   |
| ٠.          | DI                    |   |             | FF440 0400                 | Property was garnished.   |                    |                                   |
| St.<br>City | Paul                  |   | MN<br>State | <b>55116-0408</b> ZIP Code | Property was attached, seized, or levied.   |                    |                                   |
| ĺ           |                       |   |             |                            |   | Data               | Malara et tha annon anti-         |
|             |                       |   |             |                            | Describe the property   | Date               | Value of the property             |
|             | MC Stu<br>ditor's Nam | dent Loans  |             |                            | 2017 Tax Refund seized  | 04/2018            | \$9,500.00                        |
|             | D. Box 1              |   |             |                            |   |                    |                                   |
|             |                       | reet  |             |                            | Explain what happened   |                    |                                   |
|             |                       |   |             |                            | Property was repossessed.   |                    |                                   |
|             |                       |   |             |                            | Property was foreclosed.  |                    |                                   |
| St.         | Paul                  |   | MN          | 55116-0408                 | Property was garnished.   |                    |                                   |
| City        |                       |   | State       | ZIP Code                   | ✓ Property was attached, seized, or levied.   |                    |                                   |

| Deb  | otor 1                 | Allen Chad Gross   |                                    | Case number (if kı | nown)                 |             |
|------|------------------------|--|------------------------------------|--------------------|-----------------------|-------------|
| 11.  |                        | 0 days before you filed for bankruptcy, did ar<br>s from your accounts or refuse to make a pay |                                    |                    | stitution, set off an | у           |
|      | ✓ No<br>☐ Yes          | Fill in the details.   |                                    |                    |                       |             |
| 12.  |                        | year before you filed for bankruptcy, was an<br>s, a court-appointed receiver, a custodian, or |                                    | ossession of an    | assignee for the b    | enefit of   |
|      | ✓ No<br>☐ Yes          |  |                                    |                    |                       |             |
| Р    | art 5:                 | List Certain Gifts and Contributions   | S                                  |                    |                       |             |
| 13.  | Within 2               | years before you filed for bankruptcy, did yo  | ou give any gifts with a tota      | al value of more t | han \$600 per pers    | on?         |
|      | ✓ No<br>☐ Yes          | Fill in the details for each gift.   |                                    |                    |                       |             |
| 14.  | Within 2<br>to any o   | years before you filed for bankruptcy, did yo<br>harity?                                       | ou give any gifts or contrib       | utions with a tota | l value of more th    | an \$600    |
|      | □ No<br>☑ Yes          | Fill in the details for each gift or contribution.   |                                    |                    |                       |             |
|      |                        | ributions to charities<br>re than \$600  | Describe what you contri<br>Tithes | buted              | Date you contributed  | Value       |
|      | City Ch<br>rity's Name | urch   |                                    |                    | Monthly               | \$400.00    |
| Num  | nber Stre              | et   |                                    |                    |                       | -           |
| _    | Worth                  | TX   |                                    |                    |                       |             |
| City | art 6:                 | State ZIP Code  List Certain Losses  |                                    |                    |                       |             |
| 15.  |                        | year before you filed for bankruptcy or since saster, or gambling?                             | you filed for bankruptcy,          | did you lose any   | thing because of t    | heft, fire, |
|      | ☑ No<br>□ Yes          | Fill in the details.   |                                    |                    |                       |             |

| Debtor 1 Allen Chad Gross      |  | S  | Case number  | er (if known)   |   |
|--------------------------------|--|--|--|---|---|
| List Cer                       | rtain P  | ayments or   | Transfers  |   |   |
|                                |  |  |  | f pay or transfer any pro   | perty to  |
| e any attorney                 | /s, bankı  | ruptcy petition p  | preparers, or credit counseling agencies for services  | required for your bankrupt  | cy.   |
| o<br>es. Fill in the           | details.   |  |  |   |   |
| Associates<br>Was Paid         |  |  | Attorney's Fees - \$190.00   | ed Date payment<br>or transfer was<br>made  | Amount of payment   |
| ooper St. S                    | uite 550   | 0  | 30dir 300to 4010.00  | 10/24/2018  | \$500.00  |
| treet                          |  |  | _  |   |   |
|                                | TX   | 76011  | _  |   |   |
|                                | State  | ZIF Code   |  |   |   |
| site address                   |  |  | -  |   |   |
| Made the Paym                  | ent, if Not  | You  | -  |   |   |
| /.com                          |  |  | Description and value of any property transferro   | or transfer was   | Amount of payment   |
| vvas raiu                      |  |  |  |   | \$15.00   |
| treet                          |  |  | -  |   |   |
|                                |  |  | -  |   |   |
|                                | State  | ZIP Code   |  |   |   |
| site address                   |  |  | -  |   |   |
| Made the Paym                  | ent if Not   | You  | _  |   |   |
| n 1 year befor<br>ne who promi | re you fi<br>sed to h  | led for bankru<br>nelp you deal v  | vith your creditors or to make payments to your c  |   | perty to  |
| )<br>)                         |  | or transfer that   | t you listed on line 16.   |   |   |
|                                | a 1 year before you consult any attorney on the any attorney on th | a 1 year before you file you consulted above any attorneys, bank to be | a 1 year before you filed for bankru e you consulted about seeking banke any attorneys, bankruptcy petition pages. Fill in the details.  Associates Was Paid Cooper St. Suite 550 Treet  TX 76011 State ZIP Code  Site address  Made the Payment, if Not You  V.com Was Paid  State ZIP Code  V.com Site address  Made the Payment, if Not You  1 year before you filed for bankru e who promised to help you deal was include any payment or transfer that to the contraction of the | List Certain Payments or Transfers  1 year before you filed for bankruptcy, did you or anyone else acting on your behale you consulted about seeking bankruptcy or preparing a bankruptcy petition?  a any attorneys, bankruptcy petition preparers, or credit counseling agencies for services or services.  Bescription and value of any property transferred Attorney's Fees - \$190.00 Court Costs - \$310.00  TX 76011 State ZIP Code  Site address  Made the Payment, if Not You  Description and value of any property transferred Credit Counseling  Credit Counseling  Description and value of any property transferred Credit Counseling  T.COM  Court Costs - \$310.00  Description and value of any property transferred Credit Counseling  T.COM  Loom  State ZIP Code  T.COM  1 year before you filed for bankruptcy, did you or anyone else acting on your behale who promised to help you deal with your creditors or to make payments to your crinclude any payment or transfer that you listed on line 16. | List Certain Payments or Transfers  1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any processor or your bankruptcy petition?  2 any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.  3 any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.  3 any attorneys bankruptcy petition and value of any property transferred Attorney's Fees - \$190.00  Court Costs - \$310.00  Description and value of any property transferred Credit Counseling  Date payment or transfer was made  10/24/2018  T.Com  Was Paid  Credit Counseling  Date payment or transfer was made  10/24/2018  Date payment or transfer was made  10/24/2018  T.Com  Was Paid  Attorney's Fees - \$190.00  Court Costs - \$310.00  Description and value of any property transferred Credit Counseling  Date payment or transfer was made  10/24/2018 |

| Deb  | otor 1          | Allen Cha                   | d Gros   | s                                   |  | Case number (it                | f known)  |   |
|------|-----------------|-----------------------------|----------|-------------------------------------|--|--------------------------------|---|---|
| 18.  |                 | -                           | -        |                                     | uptcy, did you sell, trade, or                                 |                                | roperty to anyone, o  | ther than                                     |
|      |                 | ū                           |          |                                     | s made as security (such as gnave already listed on this sta   | , ,                            | st or mortgage on you   | property).                                    |
|      | ✓ No            | s. Fill in the              | details. |                                     |  |                                |   |   |
| 19.  | you are<br>✓ No | e a beneficia               | ary? (   |                                     | ruptcy, did you transfer any<br>called asset-protection device |                                | trust or similar devi   | ce of which                                   |
|      |                 |                             |          |                                     |  |                                |   |   |
| P    | art 8:          | List Cei                    | rtain F  | inancial Acc                        | counts, Instruments, S   | afe Deposit Boxes, a           | nd Storage Units  |   |
| 20.  |                 | -                           | -        | iled for bankru<br>ed, or transferr | ptcy, were any financial acc<br>ed?                            | ounts or instruments held      | d in your name, or fo   | r your  |
|      |                 | •                           | •        | •                                   | or other financial accounts; co                                | • •                            | s in banks, credit unio                                       | ns, brokerage                                 |
|      | □ No ☑ Yes      | s. Fill in the              | details. |                                     |  |                                |   |   |
|      |                 |                             |          |                                     | Last 4 digits of account number                                | Type of account or instrument  | Date account<br>was closed,<br>sold, moved,<br>or transferred | Last balance<br>before closing<br>or transfer |
|      |                 | o Bank                      |          |                                     | -  |                                | or transferred  |   |
|      |                 | rstate 20                   |          |                                     | XXXX   | ☑ Checking                     | 02/2018   | (\$4,200.00)                                  |
| Num  |                 | reet                        |          |                                     | -  | Savings Money market Brokerage |   |   |
| Arli | ington          |                             | TX       | 76018                               |  | Other                          |   |   |
| City |                 |                             | State    | ZIP Code                            | -  |                                |   |   |
| 21.  | -               |                             | -        | ou have within<br>ner valuables?    | 1 year before you filed for                                    | bankruptcy, any safe dep       | osit box or other dep   | ository                                       |
|      | ☑ No<br>□ Yes   | s. Fill in the              | details. |                                     |  |                                |   |   |
| 22.  | <b>☑</b> No     | ou stored poss. Fill in the |          | in a storage ur                     | nit or place other than your                                   | home within 1 year before      | you filed for bankru  | iptcy?  |

| Deb | tor 1           | Allen Chad Gross  | Case number (if known)                         |
|-----|-----------------|---|--|
| Pa  | art 9:          | Identify Property You Hold or Control for Someone Else  | <b>)</b>                                       |
| 23. | •               | hold or control any property that someone else owns? Include any prin trust for someone.  | operty you borrowed from, are storing for,     |
|     | ✓ No<br>☐ Yes   | . Fill in the details.  |  |
| Pa  | art 10:         | Give Details About Environmental Information  |  |
| For | the purp        | ose of Part 10, the following definitions apply:  |  |
| ł   | nazardou        | nental law means any federal, state, or local statute or regulation cond<br>is or toxic substance, wastes, or material into the air, land, soil, surfac<br>a statutes or regulations controlling the cleanup of these substances, w | e water, groundwater, or other medium,         |
|     |                 | ns any location, facility, or property as defined under any environmen<br>or used to own, operate, or utilize it, including disposal sites.   | al law, whether you now own, operate, or       |
|     |                 | us material means anything an environmental law defines as a hazarde, hazardous material, pollutant, contaminant, or similar item.  | ous waste, hazardous substance, toxic          |
| Rep | ort all no      | otices, releases, and proceedings that you know about, regardless of v  | when they occurred.                            |
| 24. | Has any<br>law? | governmental unit notified you that you may be liable or potentially li   | able under or in violation of an environmental |
|     | ✓ No<br>☐ Yes   | . Fill in the details.  |  |
| 25. | ☑ No            | ou notified any governmental unit of any release of hazardous material.  Fill in the details.   | ?  |
| 26. | Have you        | ou been a party in any judicial or administrative proceeding under any  | environmental law? Include settlements and     |
|     | ✓ No<br>☐ Yes   | . Fill in the details.  |  |

| Deb         | otor 1               | Allen Chad Gross   | Case  | e number (if known)   |
|-------------|----------------------|--|---|---|
| Р           | art 11:              | Give Details About Your Business   | s or Connections to Any Bu                                | usiness   |
| 27.         | Within busines       | 4 years before you filed for bankruptcy, did<br>ss?  | you own a business or have any                            | of the following connections to any   |
|             |                      | A member of a limited liability company (LLC   | b) or limited liability partnership (LLI) f a corporation |   |
|             |                      | None of the above applies. Go to Part 12.  Check all that apply above and fill in the det  | ails below for each business.                             |   |
| 28.         |                      | 2 years before you filed for bankruptcy, did<br>ncial institutions, creditors, or other parties  |   | anyone about your business? Include   |
|             | □ No<br>□ Yes        | s. Fill in the details below.  |   |   |
| Р           | art 12:              | Sign Below   |   |   |
| that<br>pro | t answer<br>perty by | the answers on this <i>Statement of Financial</i> s are true and correct. I understand that material in connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3571. | aking a false statement, conceali                         | ng property, or obtaining money or  |
| X           | /s/ Allen            | Chad Gross X   | Signature of Debtor 2                                     |   |
|             | Allen Cha            | ad Gross, Debtor 1   | Signature of Debtor 2                                     |   |
| I           | Date                 | 10/25/2018   | Date  |   |
| Did         | you atta             | ch additional pages to Your Statement of Fi  | nancial Affairs for Individuals Fil                       | ling for Bankruptcy (Official Form 107)?  |
| ☑           | No<br>Yes            |  |   |   |
| Did         | you pay              | or agree to pay someone who is not an atte   | orney to help you fill out bankrup                        | otcy forms?   |
| <b>☑</b>    |                      | me of person   |   | _Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119). |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
   Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

| + | \$75  | filing fee<br>administrative fee<br>trustee surcharge |
|---|-------|---|
|   | \$335 | total fee   |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

| + |         | filing fee<br>administrative fee |
|---|---------|----------------------------------|
|   | \$1,717 | total fee                        |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

| ŀ |       | filing fee<br>administrative fee |
|---|-------|----------------------------------|
|   | \$275 | total fee                        |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

| + |       | filing fee<br>administrative fee |  |
|---|-------|----------------------------------|--|
|   | \$310 | total fee                        |  |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

# Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to:

 $\frac{http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/Bankruptcy/Resources/ApprovedCreditAndDebtCounselors.aspx.}{}$ 

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

| In | re Allen Chad Gross  | Case No.                      |                                 |  |
|----|--|-------------------------------|---------------------------------|--|
|    |  | Chapter                       | 13                              |  |
|    | DISCLOSURE OF COMPENSATION C   | F ATTORNEY FOR                | DEBTOR                          |  |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that compensation paid to me within one year before the filing of the services rendered or to be rendered on behalf of the debtor(s) in co is as follows: | e petition in bankruptcy, or  | agreed to be paid to me, for    |  |
|    | For legal services, I have agreed to accept  | \$:                           | 3,700.00                        |  |
|    | Prior to the filing of this statement I have received  |                               | \$190.00                        |  |
|    | Balance Due  | \$:                           | 3,510.00                        |  |
| 2. | The source of the compensation paid to me was:  ☐ Other (specify)  |                               |                                 |  |
| 3. | The source of compensation to be paid to me is:  |                               |                                 |  |
|    | ✓ Debtor ☐ Other (specify)   |                               |                                 |  |
| 4. | ☑ I have not agreed to share the above-disclosed compensation associates of my law firm.   | with any other person unle    | ss they are members and         |  |
|    | ☐ I have agreed to share the above-disclosed compensation with associates of my law firm. A copy of the agreement, together v compensation, is attached.   |                               |                                 |  |
| 5. | In return for the above-disclosed fee, I have agreed to render legal   | service for all aspects of th | e bankruptcy case, including:   |  |
|    | a. Analysis of the debtor's financial situation, and rendering advice bankruptcy;  | to the debtor in determinin   | g whether to file a petition in |  |
|    | b. Preparation and filing of any petition, schedules, statements of a  | offairs and plan which may b  | pe required;                    |  |
|    | c. Representation of the debtor at the meeting of creditors and con  | firmation hearing, and any    | adjourned hearings thereof;     |  |

| B2030   | (Form   | 2030) | (12/15) |
|---------|---------|-------|---------|
| DZU3U 1 | LEOIIII | 20301 | (12/13) |

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10/25/2018 /s/ Daniel S. Wright

Date Daniel S. Wright

Machi & Associates 1521 N. Cooper St., Suite 550 Arlington, TX 76011 Bar No. 24037742

Phone: (817) 335-8880

/s/ Allen Chad Gross

Allen Chad Gross

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF TEXAS FORT WORTH DIVISION

IN RE: Allen Chad Gross CASE NO

CHAPTER 13

## **VERIFICATION OF CREDITOR MATRIX**

|      | The above nam | ied Debtor h | ereby verifies | that the attac | hed list of cre | editors is true a | and correct to t | he best of h | nis/her |
|------|---------------|--------------|----------------|----------------|-----------------|-------------------|------------------|--------------|---------|
| know | ledge.        |              |                |                |                 |                   |                  |              |         |

| Date | 10/25/2018 | Signature _/s/ Allen Chad Gross |
|------|------------|---------------------------------|
|      |            | Allen Chad Gross                |
|      |            |                                 |
|      |            |                                 |
| Date |            | Signature                       |

360 Smart Car 624 N. Watson Arlington, TX 76011

Capital One P.O. Box 60000 Seattle, WA 98190-6000

Credit One P.O. Box 625 Metairie, LA 70004

Dustin & Jana McElwarth 502 Turnstone Dr. Mansfield, TX 76063

ECMC Student Loans
P.O. Box 16408
St. Paul, MN 55116-0408

El Dorado 2626 E. Oakland Park Blvd. Fort Lauderdale, FL 33306

Internal Revenue Service Special Procedures - Insolvency P.O. Box 7346 Philadelphia, PA 19101-7346

Jana K Gross 5616 Autumn Wheat Trail Arlington, TX 76017

Machi & Associates, P.C. 1521 N. Cooper St., Suite 550 Arlington, TX 76011 NTTA P.O. Box 260928 Plano, TX 75026

Office of the Attorney General 1412 Main Street, Suite 810 Dallas, TX 75202

Speedy Cash 815 E Pioneer Pkwy Arlington, TX 76010

United States Attorney Office of the U.S. Atty. 1100 Commerce Street, 3rd Floor Dallas, TX 75242-1074

Wells Fargo Bank 101 E. Interstate 20 Arlington, TX 76018

Wells Fargo Home Mortgage P.O. Box 14411 Des Moines, IA 50306-3411

William T. Neary Office Of The United States Trustee 1100 Commerce, Street, Rm 976 Dallas, TX 75242-1496

| Fill in this inf   |  | Jan4:6  |  | Chack as   | directed in lines 17   | 2nd 24                      |
|--|--|---|--|--|--|-----------------------------|
| Fill in this inf   | ormation to id   | dentify your case:  |  |  |  |                             |
| Debtor 1   | Allen<br>First Name                                    | Chad<br>Middle Name   | Gross<br>Last Name   | According to Statement:  | the calculations required  | by this                     |
| Debtor 2<br>(Spouse, if filing)  | First Name   | Middle Name   | Last Name  |  | ble income is not determ<br>1 U.S.C. § 1325(b)(3).                               | nined                       |
|  |  | the: NORTHERN DIS   |  | 2. Disposa   | ble income is determined U.S.C. § 1325(b)(3).                                    | d                           |
| Case number  | apto) Court to   |   |  | ·  | nmitment period is 3 year  | rs.                         |
| (if known)   |  |   |  | —  | nmitment period is 5 year  |                             |
| Official Form  | 122C-1   |   |  | Check if the   | his is an amended filing   |                             |
| hapter 13  | Statement of   | of Your Current<br>nmitment Period  | Monthly Income   |  |  | 1:                          |
| Part 1: Ca   | Iculate Your A   | Average Monthly In  | come   |  |  |                             |
| What is your   | marital and filing                                     | status? Check one on  | ly.  |  |  |                             |
| ☐ Not mar  | ried. Fill out Colu                                    | mn A, lines 2-11.   |  |  |  |                             |
| ✓ Married.   | Fill out both Colu                                     | umns A and B, lines 2-11  | l.   |  |  |                             |
| bankruptcy c<br>August 31. If<br>in the result.  | the amount of you not include an                       | 101(10A). For example<br>ur monthly income varied<br>y income amount more t   | from all sources, derived<br>e, if you are filing on Septem<br>d during the 6 months, add th<br>han once. For example, if b<br>eve nothing to report for any | ber 15, the 6-mont<br>ne income for all 6<br>oth spouses own t | th period would be March<br>months and divide the to<br>he same rental property, | n 1 through<br>otal by 6. I |
|  |  |   |  | Column A Debtor 1  | Column B  Debtor 2 or non-filing spouse  |                             |
|  | rages, salary, tip<br>roll deductions).                | s, bonuses, overtime, a   | and commissions  | \$8,333.35   | \$0.00   |                             |
| Alimony and  | maintenance pa   | yments. Do not include  | payments from a spouse.  | \$0.00   | \$0.00   |                             |
| expenses of pregular contributions of the preduction of the preduc | you or your dependentions from an urents, parents, and | which are regularly parendents, including child<br>nmarried partner, member<br>roommates. Do not inclunts you listed on line 3. | d support. Include ers of your household,  | \$0.00   | \$0.00   |                             |
| Net income fi  | rom operating a  | business, profession, c   | or farm  |  |  |                             |
|  |  | Debtor 1  | Debtor 2   |  |  |                             |
| Gross receipts deductions)   | s (before all  | \$0.00  | \$0.00   |  |  |                             |
| •  | necessary operati                                      | ng <b>_</b> \$0.00  | _ \$0.00   |  |  |                             |

expenses

profession, or farm

Net monthly income from a business, \_\_\_

\$0.00 Copy here →

\$0.00

\$0.00

\$0.00

| Deb | tor 1     | Allen Chad Gross   |  |   |                | Case number (if k  | nown)                                  |  |
|-----|-----------|--|--|---|----------------|--------------------|--|--|
|     |           |  |  |   |                | Column A Debtor 1  | Column B Debtor 2 or non-filing spouse |  |
| 6.  | Net       | ncome from rental and other r  | eal property   |   |                |                    |  |  |
|     |           |  | Debtor 1   | Debtor 2  |                |                    |  |  |
|     |           | s receipts (before all   | \$0.00   | \$0.00  |                |                    |  |  |
|     | Ordi      | ictions) hary and necessary operating -  | \$0.00   | \$0.00  |                |                    |  |  |
|     | Net       | enses<br>monthly income from rental or<br>r real property  | \$0.00   | \$0.00  | Copy<br>here → | \$0.00             | \$0.00                                 |  |
| 7.  |           | rest, dividends, and royalties   |  |   |                | \$0.00             | \$0.00                                 |  |
| 8.  | Une       | mployment compensation   |  |   |                | \$0.00             | \$0.00                                 |  |
|     |           | ot enter the amount if you conte<br>fit under the Social Security Act  |  |   |                |                    |  |  |
|     | F         | or you   |  | \$0.0   | 00             |                    |  |  |
|     | F         | or your spouse   |  | \$0.0   | 00             |                    |  |  |
| 9.  |           | sion or retirement income. Do a benefit under the Social Secu  | ,  | nount received that   |                | \$0.00             | \$0.00                                 |  |
| 11. | Tota Calc | I amounts from separate pages, ulate your total average montl lines 2 through 10 for each colunt add the total for Column A to the   | if any.<br>nly income.<br>mn.  | В.  |                | \$8,333.35         | + \$0.00                               | = \$8,333.35  Total average monthly income |
| Pa  | art 2     | Determine How to M   | easure Your D  | eductions fron  | n Incom        | е                  |  |  |
| 12. | Cop       | y your total average monthly in  | ncome from line 1  | 1   |                |                    |  | \$8,333.35                                 |
| 13. | -         | ulate the marital adjustment.  |  |   |                |                    |  |  |
|     |           | You are not married. Fill in 0 be You are married and your spous You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for exceeding the processory, list additional adjust If this adjustment does not applied. | se is filing with you. se is not filing with y listed in line 11, Co n as payment of the luding this income a ments on a separat | you.  blumn B, that was I  spouse's tax liabil  and the amount of | ity or the s   | spouse's support o | of someone other                       |  |
| 14. | Υοιιι     | Total  |  |   |                | \$0.00 Cop         | y here →                               | <b>-</b> \$0.00                            |

| Deb | otor 1                   | Allen Chad Gross   | Case number (if known)   |                     |
|-----|--------------------------|--|--|---------------------|
| 15. | Calc                     | ulate your current monthly income for the year   | . Follow these steps:  |                     |
|     | 15a. Copy line 14 here 😝 |  |  | \$8,333.35          |
|     |                          | X 12   |  |                     |
|     | 15b.                     | The result is your current monthly income for the  | e year for this part of the form.  | <b>\$100,000.20</b> |
| 16. | Calc                     | ulate the median family income that applies to   | you. Follow these steps:   |                     |
|     | 16a.                     | Fill in the state in which you live.   | Texas  |                     |
|     | 16b.                     | Fill in the number of people in your household.  | 4  |                     |
|     | 16c.                     | ,  | nd size of household<br>ints, go online using the link specified in the separate<br>available at the bankruptcy clerk's office.  | \$78,572.00         |
| 17. | How                      | do the lines compare?  |  |                     |
|     | 17a.                     | <b></b>  | On the top of page 1 of this form, check box 1, <i>Disposable income is</i> 3. Do NOT fill out Calculation of Your Disposable Income (Official Fo                                |                     |
|     | 17b.                     |  | of page 1 of this form, check box 2, <i>Disposable income is determine</i> iill out Calculation of Your Disposable Income (Official Form 1220 nonthly income from line 14 above. |                     |
|     | art 3:                   |  | d Under 11 U.S.C. § 1325(b)(4)   | \$8,333.35          |
|     | Dedu                     | ict the marital adjustment if it applies. If you a   | re married, your spouse is not filing with you, and you contend<br>c. § 1325(b)(4) allows you to deduct part of your spouse's  |                     |
|     | 19a.                     | If the marital adjustment does not apply, fill in 0  | on line 19a.   | \$0.00              |
|     | 19b.                     | Subtract line 19a from line 18.  |  | \$8,333.35          |
| 20. | Calc                     | ulate your current monthly income for the year   | . Follow these steps:  |                     |
|     | 20a.                     | Copy line 19b  |  | \$8,333.35          |
|     |                          | Multiply by 12 (the number of months in a year).   |  | X 12                |
|     | 20b.                     | The result is your current monthly income for the  | e year for this part of the form.  | \$100,000.20        |
|     | 20c.                     | Copy the median family income for your state ar  | nd size of household from line 16c.  | \$78,572.00         |
| 21. | How                      | do the lines compare?  |  |                     |
|     |                          | Line 20b is less than line 20c. Unless otherwise of check box 3, <i>The commitment period is 3 years.</i>  | ordered by the court, on the top of page 1 of this form,<br>Go to Part 4.  |                     |
|     | _                        | Line 20b is more than or equal to line 20c. Unless of this form, check box 4, <i>The commitment period</i> | s otherwise ordered by the court, on the top of page 1 <i>is 5 years.</i> Go to Part 4.  |                     |

| Debtor 1     | Allen Chad Gross                                 | Case number (if known)   |
|--------------|--|--|
| Part 4:      | Sign Below                                       |  |
| By sigi      | ning here, under penalty of perjury I declare th | at the information on this statement and in any attachments is true and correct. |
| χ <u>/s/</u> | Allen Chad Gross                                 | X  |
| Alle         | en Chad Gross, Debtor 1                          | Signature of Debtor 2  |
| Dat          | te_10/25/2018                                    | Date   |
|              | MM / DD / YYYY                                   | MM / DD / YYYY   |

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

| Fill in this inf       | formation to        | identify your case        | :                  |
|------------------------|---------------------|---------------------------|--------------------|
| Debtor 1               | Allen<br>First Name | Chad<br>Middle Name       | Gross<br>Last Name |
| Debtor 2               | E AN                | At I II AI                | N                  |
| (Spouse, if filing)    |                     | Middle Name               | Last Name          |
|                        | inkruptcy Court fo  | or the: <b>NORTHERN D</b> | ISTRICT OF TEXAS   |
| Case number (if known) |                     |                           |                    |

### Official Form 122C-2

### **Chapter 13 Calculation of Your Disposable Income**

04/16

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

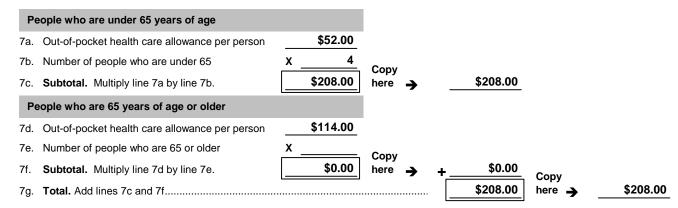
4

National Standards You must use the IRS National Standards to answer the questions in lines 6-7.

**6. Food, clothing and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$1,694.00

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.



| Debto | or 1   | Allen Chad Gross  | Case number (if known)                                |  |
|-------|--|---|---|--|
| Loc   | al Sta   | ndards You must use the IRS Local Standards to answer the   | questions in lines 8-15.                              |  |
|       |  | information from the IRS, the U.S. Trustee Program has divided uptcy purposes into two parts:   | he IRS Local Standard for housing                     |  |
|       |  | ng and utilities Insurance and operating expenses<br>ng and utilities Mortgage or rent expenses   |   |  |
| the   | link s   | er the questions in lines 8-9, use the U.S. Trustee Program chart. pecified in the separate instructions for this form. This chart may cy clerk's office. |   |  |
| 8.    |  | sing and utilities Insurance and operating expenses: Using the the dollar amount listed for your county for insurance and operating e                     |   |  |
| 9.    | Hous   | sing and utilities Mortgage or rent expenses:   |   |  |
|       |  | Using the number of people you entered in line 5, fill in the dollar and for your county for mortgage or rent expenses.                                   | unt listed \$1,402.00                                 |  |
|       |  | Total average monthly payment for all mortgages and other debts ser your home.  | cured by  |  |
|       | To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. |   |   |  |
|       |  | Name of the creditor  Average monthly payment   | <b>,</b>  |  |
|       |  |   |   |  |
|       |  | +   |   |  |
|       |  | 9b. Total average monthly payment \$0.00  | Copy here \$ - \$0.00 Repeat this amount on line 33a. |  |
|       | 9c.  | Net mortgage or rent expense.   |   |  |
|       |  | Subtract line 9b (total average monthly payment) from line 9a (mortgarent expense). If this number is less than \$0, enter \$0.                           | ge or \$1,402.00 Copy here → \$1,402.00               |  |
| 10.   |  | u claim that the U.S. Trustee Program's division of the IRS Local affects the calculation of your monthly expenses, fill in any additi                    |   |  |
|       | Expla  |   |   |  |
| 11.   |  | al transportation expenses: Check the number of vehicles for which 0. Go to line 14.  1. Go to line 12.  2 or more. Go to line 12.                        | you claim an ownership or operating expense.          |  |
| 12.   |  | cle operation expense: Using the IRS Local Standards and the num<br>ating expenses, fill in the Operating Costs that apply for your Census                | *   |  |

| or 1                 | Allen   | Chad Gross  |  |   |   |               | ase nu       | mber (if kr | າown)   |  |       |
|----------------------|---|---|--|---|---|---------------|--------------|-------------|---------|--|-------|
| expe                 | ense for e  | each vehicle bel  | low. You may not   | Local Standards, on expense if you do not more than two | o not make                                  | e any lo      |              |             | ents on |  |       |
| Veh                  | Vehicle 1 Describe Vehicle 1: 2013 Ford F1            |   |  |   | 60  |               |              |             |         |  |       |
| 13a.                 | ı. Ownersh  | nip or leasing co   | osts using IRS Loc   | cal Standa  | ard   |               |              | \$4         | 97.00   |  |       |
| 13b.                 | . Average   | monthly payme   | ent for all debts se   | ecured by   | Vehicle 1.                                  |               |              |             |         |  |       |
|                      | Do not in   | nclude costs for  | leased vehicles.   |   |   |               |              |             |         |  |       |
|                      | amounts   | s that are contra   |  | ch secure   | nd on line 13e, add<br>d creditor in the 60 |               |              |             |         |  |       |
|                      | Name  | of each credito   | or for Vehicle 1   |   | Average month payment                       | lly           |              |             |         |  |       |
|                      | 360 Sm  | nart Car  |  |   | \$676.65                                    |               |              |             |         |  |       |
|                      |   |   |  | 4   | <b>+</b>                                    |               |              |             |         |  |       |
|                      |   |   |  |   |   | Сору          |              | •           |         | Repeat this<br>amount on   |       |
|                      |   | Total a   | verage monthly pa  | ayment  | \$676.65                                    | here •        | → -          | - \$6       | 76.65   | line 33b.  |       |
| 13c.                 |   | icle 1 ownership  | o or lease expense   | e.  |   | here •        | → -          |             |         | Copy net<br>Vehicle 1<br>expense   |       |
| 13c.                 |   | icle 1 ownership  | o or lease expense   | e.  | \$676.65<br>ess than \$0, enter             | here •        | <b>→</b> -   |             |         | Copy net<br>Vehicle 1  | \$0.0 |
|                      |   | icle 1 ownership  | o or lease expense<br>ine 13a. If this nu  | e.  |   | here •        | <b>→</b> -   |             |         | Copy net<br>Vehicle 1<br>expense   | \$0.0 |
|                      | Subtract  | icle 1 ownership<br>t line 13b from li  | o or lease expense<br>ine 13a. If this nu  | e.  |   | here •        | <b>→</b> -   |             |         | Copy net<br>Vehicle 1<br>expense   | \$0.0 |
| <b>Veh</b>           | Subtract  nicle 2                                     | icle 1 ownership t line 13b from li  Describe Vel nip or leasing co   | o or lease expense<br>ine 13a. If this nu<br>nicle 2:  | e.<br>Imber is le                                       | ess than \$0, enter                         | <b>here •</b> |              |             |         | Copy net<br>Vehicle 1<br>expense   | \$0.0 |
| <b>Veh</b>           | Subtract  nicle 2  I. Ownersh  Average                | icle 1 ownership t line 13b from li  Describe Vel nip or leasing co   | o or lease expense ine 13a. If this nu nicle 2:  | e.<br>Imber is le                                       | ess than \$0, enter                         | <b>here •</b> |              |             |         | Copy net<br>Vehicle 1<br>expense   | \$0.0 |
| <b>Veh</b>           | Subtract  nicle 2  I. Ownersh  Average costs for      | icle 1 ownership t line 13b from li  Describe Vel  nip or leasing commonthly payment leased vehicle   | o or lease expense ine 13a. If this nu nicle 2:  | e.<br>Imber is le                                       | ess than \$0, enter                         | \$0t include  |              |             |         | Copy net<br>Vehicle 1<br>expense   | \$0.0 |
| <b>Veh</b>           | Subtract  nicle 2  I. Ownersh  Average costs for      | icle 1 ownership t line 13b from li  Describe Vel  nip or leasing commonthly payment leased vehicle   | o or lease expense ine 13a. If this nu nicle 2: osts using IRS Locent for all debts sees.                    | e.<br>Imber is le                                       | ess than \$0, enter                         | \$0t include  |              |             | \$0.00  | Copy net Vehicle 1 expense here  | \$0.0 |
| <b>Veh</b>           | Subtract  nicle 2  I. Ownersh  Average costs for      | icle 1 ownership t line 13b from li  Describe Vel  nip or leasing contents a monthly payment leased vehicle  of each credite                                      | o or lease expense ine 13a. If this nu nicle 2: osts using IRS Locent for all debts sees.                    | e.<br>Imber is le<br>cal Standa                         | ess than \$0, enter                         | \$0t include  |              |             | \$0.00  | Copy net<br>Vehicle 1<br>expense   | \$0.0 |
| <b>Veh</b> 13d. 13e. | Subtract  nicle 2  I. Ownersh  Average costs for Name | icle 1 ownership t line 13b from li  Describe Vel  inip or leasing content and the monthly payment released vehicle  of each creditor                             | o or lease expense ine 13a. If this nu nicle 2:  osts using IRS Locent for all debts sees.  or for Vehicle 2 | e. Imber is le  | ess than \$0, enter ard Vehicle 2. Do no    | \$0t include  |              |             | \$0.00  | Copy net Vehicle 1 expense here  | \$0.0 |
| <b>Veh</b> 13d. 13e. | Subtract  icle 2  I. Ownersh  Average costs for Name  | icle 1 ownership t line 13b from li  Describe Vel  inip or leasing content and the monthly payment released vehicle  of each creditor  Total and icle 2 ownership | o or lease expense ine 13a. If this nu nicle 2:  osts using IRS Locent for all debts sees.                   | e. Imber is le  | ess than \$0, enter                         | \$0t include  | ············ |             | \$0.00  | Copy net Vehicle 1 expense here  Repeat this amount on line 33c.  Copy net | \$0.0 |

| Debto | Allen Chad Gross  | Case number (if known)  |            |
|-------|---|---|------------|
|       | • • • • • •   | se: If you claimed 1 or more vehicles in line 11 and if you claim that you may use, you may fill in what you believe is the appropriate expense, but you may ard for Public Transportation.   | \$0.00     |
| Othe  | • •   | to the expense deductions listed above, you are allowed your monthly expenses for RS categories.  | the        |
|       | employment taxes, social security taxes, your pay for these taxes. However, if you  | and Medicare taxes. You may include the monthly amount withheld from a expect to receive a tax refund, you must divide the expected refund by 12 nonthly amount that is withheld to pay for taxes.  | \$1,952.41 |
|       | union dues, and uniform costs.  | thly payroll deductions that your job requires, such as retirement contributions, ired by your job, such as voluntary 401(k) contributions or payroll savings.  | \$0.00     |
|       | filing together, include payments that you  | ums that you pay for your own term life insurance. If two married people are make for your spouse's term life insurance. e on your dependents, for a non-filing spouse's life insurance, or for any   | \$0.00     |
|       | agency, such as spousal or child support  | nthly amount that you pay as required by the order of a court or administrative payments.  igations for spousal or child support. You will list these obligations in line 35.   | \$0.00     |
| 20.   | <ul><li>as a condition for your job, or</li></ul>   | at you pay for education that is either required:  ged dependent child if no public education is available for similar services.  | \$0.00     |
| 21.   |   | it you pay for childcare, such as babysitting, daycare, nursery, and preschool.   | \$0.00     |
| 22.   | is required for the health and welfare of y health savings account. Include only the  | ding insurance costs: The monthly amount that you pay for health care that ou or your dependents and that is not reimbursed by insurance or paid by a amount that is more than the total entered in line 7. savings accounts should be listed only in line 25.  | \$0.00     |
|       | for you and your dependents, such as pa<br>phone service, to the extent necessary for<br>of income, if it is not reimbursed by your<br>Do not include payments for basic home | <b>rvices:</b> The total monthly amount that you pay for telecommunication services gers, call waiting, caller identification, special long distance, or business cell or your health and welfare or that of your dependents or for the production employer. telephone, internet and cell phone service. Do not include self-employment a 5 of Official Form 122C-1, or any amount you previously deducted. | \$0.00     |
|       | Add all of the expenses allowed under Add lines 6 through 23.   | the IRS expense allowances.   | \$6,644.41 |
| Addi  | •   | are additional deductions allowed by the Means Test.  Do not include any expense allowances listed in lines 6-24.   |            |
|       | Health insurance, disability insurance,   | and health savings account expenses. The monthly expenses for health h savings accounts that are reasonably necessary for yourself, your  |            |
|       | Health insurance  | <b>\$427.96</b>   |            |
|       | Disability insurance  | \$0.00  |            |
|       | Health savings account  | +\$0.00_  |            |
|       | Total   | \$427.96 Copy total here  | \$427.96   |
|       | Do you actually spend this total amount?  |   |            |
|       | <ul><li>No. How much do you actually sper</li><li>✓ Yes</li></ul>   | nd?   |            |
|       | will continue to pay for the reasonable an member of your household or member of  | household or family members. The actual monthly expenses that you d necessary care and support of an elderly, chronically ill, or disabled your immediate family who is unable to pay for such expenses. These account of a qualified ABLE program. 26 U.S.C. § 529A(b).  | \$0.00     |

| Debto | or 1 Allen Chad Gross  | Case number (if known)                                |       |       |
|-------|--|---|-------|-------|
| 27.   | <b>Protection against family violence.</b> The reasonably necessary safety of you and your family under the Family Violence Preventible By law, the court must keep the nature of these expenses confidence. | on and Services Act or other federal laws that apply. | \$    | 0.00  |
| 28.   | <b>Additional home energy costs.</b> Your home energy costs are incon line 8.  | cluded in your insurance and operating expenses       |       |       |
|       | If you believe that you have home energy costs that are more that line 8, then fill in the excess amount of home energy costs.   | in the home energy costs included in expenses on      |       |       |
|       | You must give your case trustee documentation of your actual examount claimed is reasonable and necessary.   | penses, and you must show that the additional         |       |       |
| 29.   | Education expenses for dependent children who are younger \$160.42* per child) that you pay for your dependent children who public elementary or secondary school.   | •               | \$    | 0.00  |
|       | You must give your case trustee documentation of your actual exclaimed is reasonable and necessary and not already accounted   |   |       |       |
|       | * Subject to adjustment on 4/01/19, and every 3 years after that f   | or cases begun on or after the date of adjustment.    |       |       |
| 30.   | Additional food and clothing expense. The monthly amount by higher than the combined food and clothing allowances in the IRS than 5% of the food and clothing allowances in the IRS National 3.              | S National Standards. That amount cannot be more      |       |       |
|       | To find a chart showing the maximum additional allowance, go or instructions for this form. This chart may also be available at the  |   |       |       |
|       | You must show that the additional amount claimed is reasonable   | and necessary.  |       |       |
| 31.   | Continuing charitable contributions. The amount that you will instruments to a religious or charitable organization. 11 U.S.C. §   | ·   | +\$40 | 00.00 |
|       | Do not include any amount more than 15% of your gross monthly  | rincome.  |       |       |
| 32.   | Add all of the additional expense deductions. Add lines 25 though 31.  |   | \$82  | 27.96 |

| ebto | or 1   | Alle   | en Chad Gross       |                     |   |                     |                   | Case n        | umber (if known)         |                 |          |
|------|--|--|---------------------|---------------------|---|---------------------|-------------------|---------------|--------------------------|-----------------|----------|
| Ded  | luction  | ns for   | Debt Payment        |                     |   |                     |                   |               |                          |                 |          |
| 33.  | For debts that are secured by an interest in property that you own, including home n loans, and other secured debt, fill in lines 33a through 33e.       |  |                     |                     |   |                     | nortgages, vehic  | :le           |                          |                 |          |
|      |  | To calculate the total average monthly payment, add all amounts that are contractually due the 60 months after you file for bankruptcy. Then divide by 60. |                     |                     |   |                     | e to each secure  | d creditor in |                          |                 |          |
|      | the of months are, you lie for bank  |  |                     |                     | Av  |                     |                   |               | verage monthly<br>syment |                 |          |
|      |  | Mor  | tgages on your      | home                |   |                     |                   |               |                          |                 |          |
|      | 33a.   | Сор  | y line 9b here      |                     |   |                     |                   | →             | \$0.00                   |                 |          |
|      |  | Loa  | ns on your first    | two vehicles        |   |                     |                   |               |                          |                 |          |
|      | 33b.   |  | •                   |                     |   |                     |                   |               | \$676.65                 |                 |          |
|      | 33c.   | Сор  | y line 13e here     |                     |   |                     |                   | →             | \$0.00                   |                 |          |
|      | 33d.   | List   | other secured de    | bts:                |   |                     |                   |               | _                        |                 |          |
|      |  |  | ach creditor for    |                     | Identify property                             | that                | Does pa           | -             |                          |                 |          |
|      | otner  | secu   | ired debt           |                     | secures the debt                              |                     | include insurance |               |                          |                 |          |
|      | EI Do  | orad   | •                   |                     | Timeshare - Gra                               | ndviow              | Las ☑             | No            | <b>\$59.32</b>           |                 |          |
|      | EI D   | orau   | <u> </u>            |                     | Tilleshare - Gra                              | muview,             |                   | Yes           | <u> </u>                 |                 |          |
|      |  |  |                     |                     |   |                     |                   | No            |                          |                 |          |
|      |  |  |                     |                     |   |                     |                   | Yes           |                          |                 |          |
|      |  |  |                     |                     |   |                     | □                 | No +          | •                        |                 |          |
|      |  |  |                     |                     |   |                     |                   | Yes           |                          | Conv total      |          |
|      | 33e.   | Tota   | al average monthl   | y payment. A        | Add lines 33a throug                          | gh 33d              |                   |               | \$735.97                 | Copy total here | \$735.97 |
| 34.  | Are a  | any de   | ebts that you list  | ed in line 33       | secured by your p                             | rimary res          | sidence, a        | a vehicle     | , or other prope         | rty             |          |
|      | nece   | ssary  | for your suppor     | rt or the sup       | port of your depen                            | dents?              |                   |               |                          |                 |          |
|      |  | No.  | Go to line 35.      |                     |   |                     |                   |               |                          |                 |          |
|      | <b>V</b>   | Yes.   | •                   | •                   | ust pay to a creditor                         |                     |                   | -             |                          | •               |          |
|      |  |  | possession or ye    | our property (      | called the cure amo                           | uni). Nexi          | , divide by       | y 60 and      | illi ili tile illioillai | ion below.      |          |
| Nan  | ne of t  | he cr  | editor              | Identify properties |   | Total cur<br>amount | re                |               | Monthly cure amount      |                 |          |
|      |  |  |                     | Secures tric        | uest  | amount              |                   |               | amount                   | l               |          |
|      |  |  |                     |                     |   |                     | ÷                 | 60 =          |                          |                 |          |
|      |  |  |                     |                     |   |                     | ÷                 | 60 =          |                          |                 |          |
|      |  |  |                     |                     |   |                     | <br>÷             | 60 = 4        |                          |                 |          |
|      |  |  |                     |                     |   | -                   |                   | •<br>Total    | \$0.00                   | Copy total      | \$0.00   |
|      |  |  |                     |                     |   |                     |                   |               |                          | here →          | <u> </u> |
| 35.  | <ol> <li>Do you owe any priority claimssuch as a priority tax<br/>alimonythat are past due as of the filing date of your<br/>11 U.S.C. § 507.</li> </ol> |  |                     |                     |   |                     |                   |               |                          |                 |          |
|      |  | No.  | Go to line 36.      |                     |   |                     |                   |               |                          |                 |          |
|      | ш.   | Yes.   | Fill in the total a |                     | of these priority clain<br>ims, such as those |                     |                   |               |                          |                 |          |
|      |  |  | Total amount of     | all past-due p      | oriority claims                               |                     |                   |               | \$3,510.00               | ÷ 60 =          | \$58.50  |
|      |  |  |                     |                     |   |                     |                   |               |                          |                 |          |

Debtor 1

**Allen Chad Gross** 

| Debto | or 1 Allen Chad Gross  | Case number (if known)                |
|-------|--|---------------------------------------|
| 36.   | Projected monthly Chapter 13 plan payment  | \$825.00                              |
|       | Current multiplier for your district as stated on the list issued by the Admin Office of the United States Courts (for districts in Alabama and North Card by the Executive Office for United States Trustees (for all other districts).   |                                       |
|       | To find a list of district multipliers that includes your district, go online usin specified in the separate instructions for this form. This list may also be a at the bankruptcy clerk's office.   |                                       |
|       | Average monthly administrative expense   | \$82.50 Copy total here \$82.50       |
| 37.   | Add all of the deductions for debt payment. Add lines 33g through 36.  | \$876.97                              |
| Tota  | al Deductions from Income  |                                       |
| 38.   | Add all of the allowed deductions.   |                                       |
|       | Copy line 24, All of the expenses allowed under IRS expense allowances   | s <u>\$6,644.41</u>                   |
|       | Copy line 32, All of the additional expense deductions   | \$827.96_                             |
|       | Copy line 37, All of the deductions for debt payment   | +\$876.97                             |
|       | Total deductions   | \$8,349.34 Copy total here \$8,349.34 |
|       | Determine Your Disposable Income Under 11 U.S.   |                                       |
| 33.   | Copy your total current monthly income from line 14 of Form 122C-1, Statement of Your Current Monthly Income and Calculation of Committee (Committee) and Calculation (Committee) a | *                                     |
| 40.   | Fill in any reasonably necessary income you receive for support of do. The monthly average of any child support payments, foster care payments disability payments for a dependent child, reported in Part 1 of Form 1220 you received in accordance with applicable nonbankruptcy law to the extereasonably necessary to be expended for such child.  | ts, or<br>C-1, that                   |
| 41.   | Fill in all qualified retirement deductions. The monthly total of all amou your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of from retirement plans, as specified in 11 U.S.C. § 362(b)(19).   | ent                                   |
| 42.   | Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here  | → \$8,349.34                          |
| 43.   | <b>Deduction for special circumstances.</b> If special circumstances justify a expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a de explanation of the special circumstances and documentation for the expenses.   | etailed                               |
|       | Describe the special circumstances Amount of expe  | ense                                  |
|       |  | <u></u>                               |
|       |  | <u></u>                               |
|       | +  | <u></u>                               |
|       | Total \$0.0  | Copy \$0.00                           |

| Debto | r1 <u>All</u>          | en Chad                       | Gross   | Case number (if kr  | nown)                                  |                                |
|-------|------------------------|-------------------------------|---|---|--|--------------------------------|
| 44.   | Total adj              | ustments.                     | Add lines 40 through 43   | \$8,389   | Copy<br>here                           | \$8,389.55                     |
| 45.   | Calculate              | your mon                      | thly disposable income under § 1325(b   | )(2). Subtract line 44 from line 39.  |  | (\$56.20)                      |
| Par   | t 3:                   | hange ir                      | n Income or Expenses  |   |  |                                |
| 46.   | virtually conformation | ertain to ch<br>n below. F    | or expenses. If the income in Form 1220 ange after the date you filed your bankrup or example, if the wages reported increase column, explain why the wages increased | otcy petition and during the time your cased after you filed your petition, check 1 | ase will be open,<br>22C-1 in the firs | fill in the<br>t column, enter |
|       | Form                   | Line                          | Reason for change   | Date of change  | Increase or decrease?                  | Amount of change               |
|       | ☐ 122<br>☐ 122         |                               | _   |   | Increase Decrease                      |                                |
|       | ☐ 122<br>☐ 122         |                               | -   |   | Increase Decrease                      | ,                              |
|       | ☐ 122<br>☐ 122         |                               | _   |   | Increase Decrease                      | •                              |
|       | ☐ 122<br>☐ 122         |                               |   |   | Increase Decrease                      | •                              |
| Par   | t 4: S                 | ign Belo                      | w   |   |  |                                |
|       | By signing             | here, und                     | er penalty of perjury you declare that the  | information on this statement and in an   | y attachments is                       | true and correct.              |
|       |                        | en Chad Chad Gross            |   | X   |  |                                |
|       | _                      | <b>10/25/201</b><br>MM / DD / |   | DateMM / DD / YYYY  |  |                                |